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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H130002812063)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305)634-3694

Fax Number

: (305)633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO. LRET-GREEN, LLC

Certificate of Status Certified Copy Page Count Estimated Charge

Electronic Filing Menu Corporate Filing Menu

Help

T. Burch IEE 2 6 28 3.

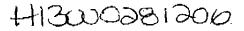
https://efile.sunbiz.org/scripts/efilcovr.exe

EMPIRE CORP

12/23/2013

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· Company of the comp	
ARTICLE I - Name:	
The name of the Limited Liability Con	npany is:
lret-green, LLC	
	·
(Must end with the words "Lis	mitted Liability Company, "L.L.C.," or "LLC.")
	mitted Liability Company, "L.L.C.," or "L.L.C.,")
ARTICLE II - Address:	of the principal office of the Limited Liability Company is:
ARTICLE II - Address:	
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Company is:
ARTICLE II - Address: The mailing address and street address Principal Office Address:	of the principal office of the Limited Liability Company is: Mailing Address:

business cority with an active Florida registration.) The name and the Florida street address of the registered agent are:

Ellioti Harris, Esq.			
Name		ယ	
111 SW 3 Street, 6th Floor		030	
Florida street address (P.O. Box NOT acceptable)	12 E	2	:
Miami, FL 33130	[H]	w	[]
City, State, and Zip	;#:;	2	Ü

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

(CONTINUED)

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15/53/5013 00:38

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	LRETHOLDING, LLC	···	
	169 East Pagier Street, Penthouse		
	Miami, Photos 33137		
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REQUIRED SIGNATURE:

prior to or 90 days after the date of filing.)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Ellioti Harris, Authorized Representative

Typed or printed name of signer

Pfling Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Cortified Copy (Optional)

5 5.00 Certificate of Status (Optional)

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