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DEC 2 6 2013 T. **HAMPTON**  ·(850) 245-6051.

## **COVER LETTER**

то:	Registration S Division of Co						
SUBJEC		LJJ LLC.					
SUBJEC	-1, <u> </u>	Name of Limit	ed Liat	oility Compa	any		
The encl	osed Articles o	of Organization and fee(s) are	submitt	ted for filing	<b>,</b>		
Please re	turn all corres	pondence concerning this matt	ter to th	e following:	:		
L	eopoldo H	ernandez					
_			Name	of Person			
C	Carmel Bus	iness Llc.					
_	Firm/Company						
2	2550 NW 72	2 Ave. # 115					
_	Address						
N	/liami, Flori	da 33122					
c	armel.busir	Cit	ty/State	and Zip Code	;		
_		E-mail address: (to be used	for futur	e annual repo	ort notification)		
For furth	er information	concerning this matter, please	call:				
Leopoldo Hernandez		dez	at (	305	965-9425		
	Name	of Person	_ ai (_	Area Code	& Daytime Tele	phone Number	
Enclose	d is a check f	or the following amount:					
□\$125.00	0 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Ce	ertified Cop		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registrati Division of Clifton B 2661 Exe	ourier Address on Section of Corporations uilding cutive Center C ee, FL 32301		

## , ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
14732 MEADOW LLC.	
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2550 NW 72 AVE # 115 Miami, Florida 33122	2550 NW 72 Ave. #115 Miami, Florida 33122
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
The name and the Florida street address of the r	
LEOPOLDO HERNANDI	<u> </u>
Name	
2550 NW 72 Ave # 115	
Florida street add Miami, Florida 33122	dress (P.O. Box <u>NOT</u> acceptable)
City, St	ate, and Zip
liability company at the place designated in a registered agent and agree to act in this capacall statutes relating to the proper and complet and accept the obligations of my position as re	accept service of process for the above stated limited this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of the performance of my duties, and I am familiar with the gistered agent as provided for in Chapter 608, F.S
Registered Agent's Signa	DEC 2
(CONTIN	UED) STEEL

Page 1 of 2

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

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

UNAL-LU" - BAGBAGGE	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Leopoldo Hernandez
	2550 NW 72 Ave. # 115
	Miami, Florida 33122
MGRM	Leopoldo Hernandez
	2550 NW 72 Ave. # 115
	Miami, Florida 33122
	<del></del>
(Use attachment if necessary)	
(Ose undermient if necessary)	
	(ODTION
LE V: Effective date, if other tha	an the date of filing: (OPTION
LE V: Effective date, if other that ffective date is listed, the date or 90 days after the date of filing	must be specific and cannot be more than five busin
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ffective date is listed, the date or 90 days after the date of filing recorded to the date of filing r	must be specific and cannot be more than five busin

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee