

01/02/2014 17:05

05461073

CLARA GIRALDO P.A.

PAGE 01

Division of Corporations

L14000001770

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140000010573)))



H140000010573ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CLARA GIRALDO, P.A.
Account Number : 119990000017
Phone : (305) 485-9300
Fax Number : (305) 485-1098

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

Email Address: _____

RECEIVED

14 JAN -3 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
DIMARCHENA INVESTMENTS, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

TALLAHASSEE, FLORIDA

2014 JAN -3 AM 10:40

Electronic Filing Menu

Corporate Filing Menu

Help B. BOSTICK

JAN - 6 2013

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

EXAMINER1/2/2014

H14 00000 10573

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY
OF

DIMARCHENA INVESTMENTS, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

DIMARCHENA INVESTMENTS, LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited
Liability Company is:

**100 FONTAINEBLEAU BLVD # 403
MIAMI, FL. 33172**

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:

The name and the Florida street address of the registered agent are:

IHOSVANY MARCHENA

100 FONTAINEBLEAU BLVD APT # 403

Florida street address (P.O.BOX NOT acceptable)

MIAMI, FL. 33172

City, State, and Zip

CLARA GIRALDO P.A.
4080 SW 84 AVE SUITE C
MIAMI, FL 33155
(305) 485-9300

FILED

2014 JAN -3 10:10:40

H14 00000 10572

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..


REGISTERED AGENT'S SIGNATURE


ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

IHOVSANY MARCHENA
100 FONTAINEBLEAU BLVD # 403
MIAMI, FL. 33172

MANAGER

(An additional article must be added if an effective date is requested)


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.)

IHOVSANY MARCHENA
Typed or printed name of signee

2014 JAN -3 4:30:40
FILED IN SP...