## L14000005993

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PICK-UP WAIT	MAIL
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SECRETARY OF DIAG.



## COVER LETTER .

TO:	Registration Division of	n Section Corporations				
CUDIE	CT.	Nebraska	Estate L	LC.		
SUBJE	.CT:	Name of Limit	ed Liability Comp	pany		
The end	closed Articles	of Organization and fee(s) are	submitted for filin	g.		
Please r	return all corre	espondence concerning this matt	er to the following	<b>g</b> :		
		Rafael	N. Sole	r		
•			Name of Person			
•			Firm/Company	•		
		4815 Ta	annery A	ve.		
-	·······		Address	•		
		Tampa	, FL. 336	524		
-			y/State and Zip Cod			
_		F-mail address; (to be used f	ampabay.r			
For furt	her informatio	on concerning this matter, please	•	,		
	fael N.		813	727-97	784	
		ne of Person		e & Daytime Tele		
Enclos	ed is a check	for the following amount:				
<b>⊒</b> \$125.0	00 Filing Fee	©\$130.00 Filing Fee & Certificate of Status	Certified Co		\$160.00 Filing Fee Certificate of Statu Certified Copy (additional copy is encl	s &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton I 2661 Ex	Courier Address tion Section of Corporations Building secutive Center Cosee, FL 32301	111.	FILLE 17 JAN -7 PH 12: 59

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Nebraska Est	ate LLC
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5921 N. NEBRASKA AVE	4815 Tannery Ave.
Tampa, FL. 33604	Tampa, FL. 33624
The name and the Florida street address of the second Rafael N. Soler  Name	
	<del></del>
4815 Tannery A	
	dress (P.O. Box <u>NOT</u> acceptable)
Tampa City, St	FL 33024 rate, and Zip
liability company at the place designated in registered agent and agree to act in this capac all statutes relating to the proper and comple	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 egistered agent as provided for in Chapter 608, F.S
Registered Agent's Signa	ture (REQUIRED)
(CONTIN	(UED)
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:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
Rafael N. Soler 'MGRM'	4815 Tannery Ave.
	Tampa, FL. 33624
	**************************************
(Use attachment if necessary)	
• • • • • • • • • • • • • • • • • • • •	he date of filing: Jivungy 1, 2d. (OPTIONAL) ust be specific and cannot be more than five business d
RTICLE V: Effective date, if other than the an effective date is listed, the date mu	
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