

Division of Corporations

FAX AUDIT NO. H1400022563

L14000021344

Page 1

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.

(((H14000022563 3)))



H140000225633ABCX

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 : MICHAEL J. FREEMAN, P.A.
Account Number : 072720000142
Phone : (305) 442-1567
Fax Number : (305) 442-1227

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

Email Address: _____

FILED
2014 JAN 29 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
14 FEB -6 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
FIFTY NINE INVESTMENTS LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

Electronic Filing Menu Corporate Filing Menu Help

FAX AUDIT NO.: H14000022563 3

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

1/29/2014

Law Offices
Michael J. Freeman, P.A.
153 Sevilla Avenue
Coral Gables, Florida 33134-6006
Email: mfreeman@freemanmiami.com

P.O. Box 140668
Coral Gables, Florida 33114-0668

Tel: 305- 442-1567
Fax: 305- 442-1227

Date: February 6, 2014
To: Division of Corporation
Fax No.: (850) 617-6383
From: Michael J. Freeman, Esq.
Subject: Fax Audit No.: H14000022563 3
FIFTY NINE INVESTMENTS LLC

Pages: 5

Gentlemen;

Enclosed please find the Articles of Organization for Fifty Nine Investments LLC assigned Fax Audit No.: H14000022563 3.

I am resending the documents for filing. I have enclosed a copy of my fax confirmation from January 29, 2014.

Please use January 29, 2014 as the original filing date


If you have any questions, please contact me.

Thank you.

Very truly yours,

Michael J. Freeman, Esq.

MJF/amb

 dictated but not
reviewed because
delay

00167055-17TREASURY DEPARTMENT CIRCULAR 230 DISCLAIMER: To ensure compliance with certain U.S. Treasury regulations, we inform you that, unless expressly stated otherwise, any U.S. federal tax advice contained in this e-mail, including any attachments, is not intended or written to be used, and cannot be used, by any person for the purpose of avoiding any penalties that may be imposed by the Internal Revenue Service. (The foregoing statement is made in accordance with Circular 230, 31 C.F.R. Part 10.)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FIFTY NINE INVESTMENTS LLC

ARTICLE II - Address:

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

Principal Office Address: 7301 SW 57 Court
Suite 565
South Miami FL 33143

Mailing Address: 7301 SW 57 Court
Suite 565
South Miami FL 33143

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2014 JAN 29 AM 10:18

FILED

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

M.J. F. Registered Agent Corp.
Name

153 Sevilla Avenue
Florida Street Address (No P.O. Box)

Coral Gables, FL 33134
City, State, and Zipcode

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 605, F.S..

Michael J. Freeman Pres
Registered Agent's Signature
(Michael J. Freeman, President)

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

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

Title:

"AMBR" = Authorized Member
"MGR" = Manager

Name and Address:

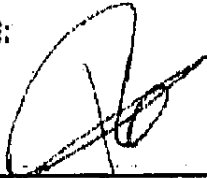
AMBR

Joseph Horn, trustee of the Joseph
Horn Revocable Trust Agreement
dated June 11, 2008
2601 South Bayshore Drive
Suite 1200
Coconut Grove, FL 33133

MGR

Allen R. Greenwald
7301 SW 57 Court
Suite 565
South Miami FL 33143

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member
(In accordance with section 605.0203 (1) (b), 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.)

Joseph Horn, trustee of the Joseph Horn Revocable
Trust Agreement dated June 11, 2008

Type or print name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization & Designation of Registered Agent
- \$30.00 Certified Copy (Optional)
- \$5.00 Certificate of Status (Optional)

FILED
2014 JAN 29 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA