

#L14000029925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

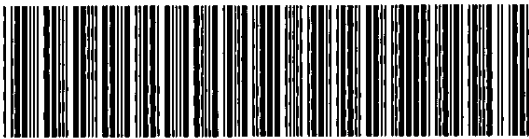
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/20/14--01029--001 **160.00

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TALLAHASSEE, FLORIDA

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K. SALY
EXAMINER
FEB 21 2014

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-23

CONTACT: **RICKY SOTO**

DATE: **02/20/2014**

REF. #: **9055882**

CORP. NAME: **LUXURY DEVELOPMENT COMPANY, LLC**

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 70015362 FOR \$ 160.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$**_____

PLEASE RETURN:

- ☒ CERTIFIED COPY ☒ CERTIFICATE OF GOOD STANDING ☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

Examiner's Initials

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
LUXURY DEVELOPMENT COMPANY, LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is **LUXURY DEVELOPMENT COMPANY, LLC**

ARTICLE II: - Address

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

Enrique Camacho
444 Brickell Ave., Suite 51-405
Miami, FL 33131

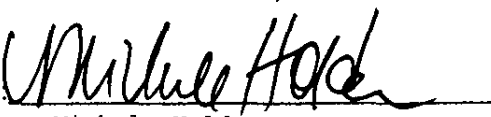
ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

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

**NRAI SERVICES, INC.
1200 S. Pine Island Road
Plantation, FL 3332**

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.

NRAI SERVICES, INC.

By: 
Name: Michele Holden
Title: Assistant Secretary

ARTICLE IV: - Management

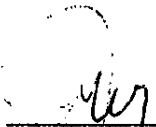
☒ The Limited Liability Company is to be managed by one Authorized Member or more Authorized Members and is, therefore, a member - managed company.

ARTICLE V: - Manager(s) or Authorized Member(s)

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

AMBR Luis F. Menocal
444 Brickell Ave., Suite 51-405
Miami, FL 33131

Enrique Camacho
444 Brickell Ave., Suite 51-405
Miami, FL 33131



Pedro A. Freyre, Authorized Representative

(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.)

Pedro A. Freyre
Typed or printed name of signee