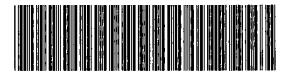
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Certified Copies	_ Certificates	of Status
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J. Shivers MAY 20 265

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJEC	CT: SYPN 11455 LLC. Name of Li	mited Liability Company	
The encl	osed Articles of Organization and fee(s) a	are submitted for filing.	
Please re	eturn all correspondence concerning this r	natter to the following:	
	Miguel A. Lopez J	r. Name of Person	
		Firm/Company	
	5600 SW 135th Av	ve., Suite 215 Address	
	Miami, FL, 33183	City/State and Zip Code	
	mike@mlcorp.com E-mail address: (to be us	ed for future annual report notifica	ation)
For furth	er information concerning this matter, ple	ease call:	
Mig	uel A. Lopez Jr. at (Name of Person		lephone Number
Enclosed	is a check for the following amount:		
☑ \$125.00	Filing Fee \$\Bigcup \\$130.00 \text{ Filing Fee & Certificate of Status}	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations	Street/Courier Add Registration Section Division of Corporate	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited	Liability Company is:			, , , , , , , , , , , , , , , , , , ,
SYPN 11455 LLC.				
(M	ust end with the words "Limit	ed Liability	Company, "L.L.C.,	" or "LLC.")
ARTICLE II - Address The mailing address and	: street address of the principal	office of th	e Limited Liability	Company is:
Principal Office Addres	<u>ss:</u>	<u>Mailir</u>	ng Address:	
5600 SW 135th Ave Miami, FL, 33183	Suite 215		SW 135th Ave: ni. FL. 33183	Suite 215
(The Limited Liability C	red Agent, Registered Office ompany cannot serve as its ow with an active Florida registrat	vn Registere		
The name and the Florida	a street address of the register	ed agent are	:	
-	Paul A. Martinez			_
	Nan	ne		
	2324 NE 174th Street			
	Florida street address (P.O. B	ox <u>NOT</u> acc	ceptable)	-
_	North Miami Beach	FL	33160	_
_	City		Zip	-
the place designated capacity. I further agre	in this certificate, I hereby acc ee to comply with the provision of familiar with and accept the con- Chu	ept the appo ns of all state obligations of apter 605, F	intment as registere utes relating to the p of my position as reg S	stated limited liability company at d agent and agree to act in this roper and complete performance gistered agent as provided for in
	Registered Agent's Sig	0	(UIKED)	ALLAH TA
		·		in it was
	Page 1 c	of2		2 PM 2:4

ARTICLE, IVThe name and address of each person authorized to manage and control the Limited Liability Company:

Title:	
"AMBR" = Authorized Member	
"MGR" = Manager	Minual A. Lanon In
AMBR	Miguel A. Lopez Jr.
	11455 SW 87th Terrace
	Miami, FL. 33173
MGR	Milagros Lopez
	11455 SW 87th Terrace
	Miami, FL. 33173
MGR	Lusette Lopez
WOA	11455 SW 87th Terrace
	Miami, FL. 33173
1400	-
MGR	Terina Lopez
	11455 SW 87th Terrace
	Miami, FL. 33173
E V: Effective date, if other than the descrive date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 or
EV: Effective date, if other than the dective date is listed, the date must be of filing.)	
(Use attachment if necessary) E V: Effective date, if other than the descrive date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	
E V: Effective date, if other than the decetive date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90 c
E V: Effective date, if other than the detective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section)	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true.
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