

L14000153107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

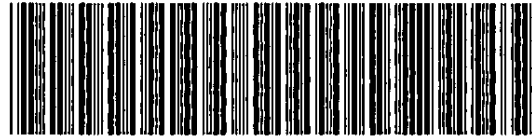
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000263342920

09/25/14--01002--018 \*\*125.00

EFFECTIVE DATE 9-22-14

FILED

2014 SEP 28 PM 12:02  
FILING OFFICE  
STATE OF NEW YORK

B. BOSTICK  
OCT - 1 2014  
EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Brown Club of Miami, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jade ~~Palomino~~ Palomino  
Name of Person

Firm/Company

1239 15th Street, Apt. 6  
Address

Miami Beach, FL 33139  
City/State and Zip Code

palomino.jade@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ivan Rodriguez at (305) 781-6941  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee      ☐ \$130.00 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  
P.O. Box 6327  
Tallahassee, FL 32314

Street/Courier Address  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

SEP 23 12 01 PM '04

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Brown Club of Miami, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

114 SW 57th Ct.  
~~1239 15th St~~  
Miami, FL 33144

114 SW 57th Ct.  
Miami, FL 33144

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jade Palomino  
Name  
1239 15th St, Apt. 6  
Florida street address (P.O. Box **NOT** acceptable)  
Miami Beach FL 33139  
City Zip

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.

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

SEP 20 10 14 AM '04

FILED

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Manager

Manager

Manager

**Name and Address:**

Laurie Stein  
11045 SW 69th Ave Rd.  
Pinecrest, FL 33156

Jade Palomino  
1239 15th Street, Apt. 6  
Miami Beach, FL 33139

Ivon Rodriguez  
114 SW 67th Ct.  
Miami, FL 33144

Daniela Amores  
1200 Brickell Bay Drive, Apt. 1822  
Miami, FL 33131

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: Sept. 22, 2014 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**ARTICLE VI:** Other provisions, if any.

**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.)

Jade Palomino

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

SEP 22 2014

FILED