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OCT 21 2014 J. BRUCE

# **COVER LETTER**

SUBJECT:	Properties S&G LLC  Name of Limited Liability Company	
	Name of Limited Liability Company	
The enclosed A	rticles of Organization and fee(s) are submitted for filing.	
Please return all	I correspondence concerning this matter to the following:	
	Steven Russell	
	Name of Person	
	Firm/Company	
	970 NE 117th St	
	Address	
	MIAMI, FL 3316/	
	City/State and Zip Code  ropertiessandg Q gnail. com  E-mail address: (to-be used for future annual report notification)	
P	ropertiessanda O anail. com	
	E-mail address: (to-be used for future annual report notification)	
For further infor	rmation concerning this matter, please call:	2200E2 2200F84
- I	Garcia al (305) 281 -9527 1777 18	
Gonzalo	Garcia at (305) 2 - 952+ - 171 =	Hanaar T
	Name of Person Area Code Daytime Telephone Number	· Carre
Enclosed is a ch	neck for the following amount:	
] \$125.00 Filing	Fee \$\sum_\$\\$130.00 \text{ Filing Fee & Certificate of Status}\$  Certificate of Status Certified Copy (additional copy is enclosed)  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

# 'ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I	- Name:
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The name of the Limited Liability Company is:

PROPERTIZS S&G 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:** 

970 NE 1174 St

**Mailing Address:** 

970 NE 1174 St MIAMI, FL 33161

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:

Name

970 NE 117th St

Florida street address (P.O. Box NOT acceptable)

M 1 Am 1 FL 33 161

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.,

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Gonzalo Garcia 970 NE 1174 St
	MIAMI, FL 33161
AMBR	Steven Russell
	MI AM 1, FL 33161
(Use attachment if necessary) EV: Effective date, if other than the	e date of filing: (OPTIONAL)
E V: Effective date, if other than the	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 day.
E V: Effective date, if other than the ective date is listed, the date must filling.)	be specific and cannot be more than five business days prior to or 90 day
E V: Effective date, if other than the ective date is listed, the date must filing.)  E VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 da
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E V: Effective date, if other than the ective date is listed, the date must filling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of (In accordance with section constitutes an affirmation I am aware that any false)	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)
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