

L15000052192

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.

(((H15000074280 3)))



H150000742803ABC.

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 : CLARA GIRALDO, P.A.
Account Number : I1999000017
Phone : (305)485-9300
Fax Number : (305)485-1098

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
DIMARCHENA 305, LLC.**

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$130.00 |

RECEIVED

15 MAR 24 11:10:00

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RECEIVED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

15 MAR 24 PM 12:22

FILED

MAR 25 2015

S. YOUNG

H/15 0000 742803

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY
OF

DIMARCHENA 305, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

DIMARCHENA 305, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**100 FONTAINEBLEAU BLVD # 403
MIAMI, FL. 33172**

The mailing address shall be:

**100 FONTAINEBLEAU BLVD # 403
MIAMI, FL. 33172**

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:

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

IHOSVANY MARCHENA

100 FONTAINEBLEAU BLVD # 403

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

MIAMI, FL. 33172

City, State, and Zip

FILED
15 MAR 24 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H/5 0000 742803

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.

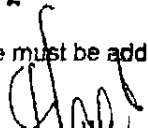

REGISTERED AGENT'S SIGNATURE**ARTICLE IV- MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

IHOSVANY MARCHENA
100 FONTAINEBLEAU BLVD # 403
MIAMI, FL. 33172

MANAGER

(An additional article must be added if an effective date is requested)


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.)**IHOSVANY MARCHENA**

Typed or printed name of signee

THE STOCKHOLDER'S FOR THIS ORGANIZATION IS:

| | |
|----------------------------|------------|
| DIANFRANCO MARCHENA | 10% |
| IHOSVANY MARCHENA | 90% |

FILED
15 MAR 24 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA