000062139

(Re	equestor's Name)
(Ac	ddress)
(Ac	ldress)
(Cit	ty/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



400269832684

04/09/15--01001--019 **155.08

APR - 9 2015

'FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)364-8000 OFFICE USE ONLY

WALK-IN

ENTITY NAME:

POH FTL LLC

CK# 6871 FOR \$155.00

PLEASE FILE THE ATTACHED ARTICLES & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

___ STAMPED COPY

___ CERTIFICATE OF STATUS

DEPARTMENT OF STATE

Examiner's Initials

ARTICLES OF ORGANIZATION OF POH FTL LLC

ARTICLE I

ACTOR PAREZO The name of this Limited Liability Company shall be POH FTL LLC (the "Company").

ARTICLE II PRINCIPAL PLACE OF BUSINESS

The principal place of business of the Company shall be 2320 West Flagler Street, Miami, FL 33135. and such other place or places as the member from time to time may determine. The mailing address of the Company is 2320 West Flagler Street, Miami, FL 33135.

ARTICLE III INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The initial registered agent of the Company shall be Atrium Registered Agents, Inc. The address of the initial registered agent is 1500 San Remo Avenue, Suite 125, Coral Gables, Florida 33146.

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The name and address of the manager who will serve as manager until the first annual meeting of members or until his successor is selected and qualified in accordance with the Operating Agreement or applicable law is:

> Ariel Croitorescu 2320 West Flagler Street Miami, FL 33135

ARTICLE V **DURATION**

The period of duration of the Company shall be perpetual, and the Company shall be in existence until dissolved in a manner provided by law, or as provided in the Operating Agreement.

IN WITNESS WHEREOF, the undersigned has caused these Articles of Organization to be executed on the 8th day of April, 2015, effective upon filing same with the Florida Department of State.

Jack D. Finkelman, 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.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

1. The name of the limited liability company is:

POH FTL LLC

2. The name and address of the registered agent and office is:

Atrium Registered Agents, Inc. 1500 San Remo Avenue, Suite 125 Coral Gables, Florida 33146



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..

ATRIUM REGISTERED AGENTS, INC

By:

Jack D. Pinkelman, Vice President

Date: April 8, 2015