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Florida Department of State  
Division of Corporations  
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FLORIDA LIMITED LIABILITY CO.  
CONSTRUCTION 1103, LLC

Certificate of Status	1
Certified Copy	0
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305 266 5758 P.004  
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

**CONSTRUCTION 1103, 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:

5249 NW 112 CT

MIAMI, FL 33178

Mailing Address:

5249 NW 112 CT

MIAMI, FL 33178

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:

**TONY AL NADDAF YBRAHIM**

Name

5249 NW 112 CT

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

MIAMI

FL 33178

City

Zip

SECRETARY OF STATE  
MIAMI  
15 MAY 14 AM 7:56

*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 (REQUIRED)

(CONTINUED)

Page 1 of 2

HT5000117680

H15000117680

**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

Name and Address:

TONY AL NADDAF YBRAHIM

5249 NW 112 CT  
MIAMI, FL 33178

AMBR

MARY H. GALLONI BERTONCINI

5249 NW 112 CT  
MIAMI, FL 33178

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

TONY AL NADDAF YBRAHIM

Typed or printed name of signee

SECRETARY OF STATE  
15 MAY 4 AM 7:56  
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

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