

L15000085487

Division of Corporations

https://www.sunbiz.org/scripts/efilecovr.exe

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.

(((H15000117184 3)))



H150001171843ABC

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 : GONZALEZ & RODRIGUEZ, P.L.
Account Number : I20040000138
Phone : (305)461-4880
Fax Number : (305)461-5880

FILED
2015 MAY 14 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: hrodriguez@gr-law.net

FLORIDA LIMITED LIABILITY CO.
Sunshine 13351, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

RECEIVED
15 MAY 14 AM 6:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H15000117184 3

**ARTICLES OF ORGANIZATION
OF
SUNSHINE 13351, LLC**

ARTICLE I - NAME

The name of this Limited Liability Company ("Company") shall be:

SUNSHINE 13351, LLC

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 1530 NW 98th CT, Suite 101 Doral, FL 33175.

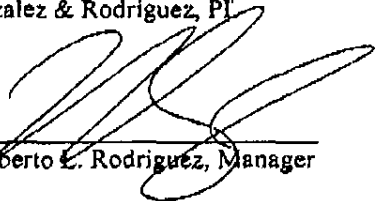
ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and Florida Street address of the initial registered agent of the Company is:

Gonzalez & Rodriguez, PL
999 Ponce De Leon Blvd., Suite 1135
Coral Gables, Florida 33134

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.

Gonzalez & Rodriguez, PL

By: 
Humberto L. Rodriguez, Manager

FILED
2015 MAY 14 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H15000117184 3

H15000117184 3

ARTICLE IVI - MANAGERS

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

Title NAME & ADDRESS
MGR Consuelo Niebla
 1530 NW 98th CT, Suite 101
 Doral, FL 33175

MGR Marcos A. Niebla
 1530 NW 98th CT, Suite 101
 Doral, FL 33175



Printed Name: Humberto C. Rodriguez
Print Title: 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 provided for in s.817.155, F.S.)

FILED
2015 MAY 14 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H15000117184 3