

L15000094530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

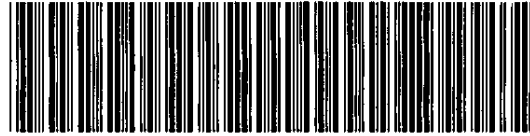
(Business Entity Name)

(Document Number)

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15 MAY 13 PM 4:29  
REGISTRY OF MOTOR VEHICLES  
TOLSON

*[Handwritten signature]*

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 1205 Tropez LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

José Rafael Badell Madrid  
Name of Person

\_\_\_\_\_  
Firm/Company

150 Sunny Isles Boulevard. Unit 1205. Sunny Isles Beach.  
Address

Florida. 33160  
City/State and Zip Code

rbadell@badellgrau.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

José Rafael Badell Madrid at (786) 4484657  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &  
Certificate of Status

\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

Mailing Address  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street 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:

The name of the Limited Liability Company is:

1205 Tropez 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:

Mailing Address:

150 Sunny Isles Boulevard  
Unit 1205, Sunny Isles Beach  
Florida, 33160

150 Sunny Isles Boulevard  
Unit 1205, Sunny Isles Beach  
Florida, 33160

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.)

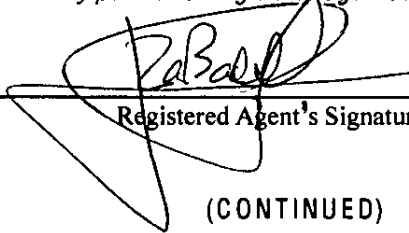
The name and the Florida street address of the registered agent are:

José Rafael Badell Madrid  
Name

150 Sunny Isles Boulevard, Sunny Isles Beach, Unit 1205  
Florida street address (P.O. Box NOT acceptable)

Miami                      Florida                      33160  
City                              State                              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..*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)  
(CONTINUED)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

José Rafael Badell Madrid

150 Sunny Isles Boulevard, Unit 1205

Sunny Isles Beach, Miami Fl 33160

AMBR

María Amparo Grau

150 Sunny Isles Boulevard, Unit 1205

Sunny Isles Beach, Miami Fl 33160

AMBR

Jessica Badell Grau

150 Sunny Isles Boulevard, Unit 1205

Sunny Isles Beach, Miami Fl 33160

AMBR

Rafael Andrés Badell Grau

150 Sunny Isles Boulevard, Unit 1205

Sunny Isles Beach, Miami Fl 33160

(Use attachment if necessary)

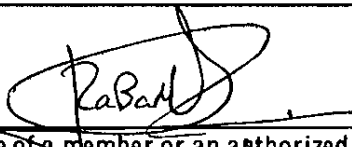
ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.)

José Rafael Badell Madrid

Typed or printed name of signee

Filing Fees:

- § 125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- § 30.00 Certified Copy (Optional)
- § 5.00 Certificate of Status (Optional)

**FILED**  
 15 MAY 13 PM 4:29  
 DEPARTMENT OF STATE  
 PALM BEACH COUNTY