L15000076053

(Rec	questor's Name)	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	questor o riamo,	
(Add	dress)	
,		
(Add	iress)	
	10	
(Cit)	//State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
	.,,	
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
		4.5
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



800273480048

06/01/15--01034--003 **155.00

SECRETARY OF STATE

:1 Hd I-NNC 51



COVER LETTER

то:	Registration 3 Division of C			·				
SUBJECT:		Lugaro Inv	estment LL	С				
SOBJEC	-1i <u> </u>	Name of Li	mited Liabili	ty Company	<u> </u>			
The encl	osed Articles o	of Organization and fee(s) a	re submitted	for filing.				
Please re	eturn all corres	pondence concerning this m	atter to the f	ollowing:				
		Rossana Lan	aro					
			Name of	Person	 			
	Lugaro Investment LLC							
			Firm/Co	mpany				
		13134 S.W. 1	32nd Terra	ce				
	<u> </u>		Addr	ess				
		Miami, Florida, 33186						
	City/State and Zip Code							
	E-mail address: (to be used for future annual report notification)							
For furthe	r information c	oncerning this matter, pleas	se call:					
	Rossana Lanaro 7			227-2092				
			Area Code	Daytime Telephon	none Number			
Enclosed	l is a check for	the following amount:						
\$125.00 Filing Fee \$130.00 Filing		\$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)			
	Mail	ing Address		Street Address				

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

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	y Company is:			15 JUN - I	PM 4: 01	
(Must end v	Lugaro Investments LLC		"L.L.C" or "LLC.")	SECRETARY TALL AHASSE		
ARTICLE II - Address: The mailing address and street ad			·			
Principal Office Address:			Mailing Address:			
13134 S.W. 132ND TER	13134 S.W. 132ND TERRACE, MIAMI FL. 33186		13134 S.W. 132ND TERRACE, MIAMI, FL. 33186			
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street a	cannot serve as its own ctive Florida registratio	Registered Agent. Y n.) agent are:		dividual or		
13134 SW 132ND TERRACE Florida street address (P.O. Box NOT acceptable)						
	MIAMI FLORIDA 33186					
	City	State	Zip			
Having been named as registered of place designated in this certificate, further agree to comply with the pr am familiar with and accept the ob	I hereby accept the appo ovisions of all statutes re	ointhentlas registered clating to the proper d	d dgent and agree to act and complete performan	in this capacity. ce of my duties, a	I	

Page 1 of 2

(CONTINUED)

Registered Agent's Signature (REQUIRED)



ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Collinson PM 4: 01 Name and Address: Title: SECRETARY OF STATE "AMBR" = Authorized Member TALLAHASSEE, FLORIDA "MGR" = Manager AMBR ROSSANA LANARO 13134 SW 132ND TERRACE MIAMI FLORIDA 33186 MGR YAJAIRA C. LUGO 13134 SW 132ND TERRACE MIAMI FLORIDA 33186 MGR RAFAEL E. LUGO 13134 SW 132ND TERRACE MIAMI FLORIDA 33186 13134 SW 132ND TERRACE MGR ROSSANA LUGO MIAMI FLORIDA 33186 (Use attachment if necessary) _. (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (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. **REOUIRED 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

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in s.817.155, F.S.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)