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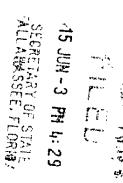
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COVER LETTER

	Registration S Division of Co				
CIID IFC"	3000 ARI	MENIA AVENUE, LLC			
SUBJEC	·	Name of	Limited Liabil	ity Company	
The enclo	sed Articles o	f Organization and fee(s)	are submitted	for filing.	
Please ret	urn all corresp	ondence concerning this	matter to the	following:	
	MARIA D	UGARTE			
			Name of	Person	
	-		Firm/Co	mpany	
	3000 N. AI	RMENIA AVE			
			Addr	ess	
	TAMPA, F	LORIDA 33607			
	mdugarte1@	outlook.com	City/State an	d Zip Code	
		E-mail address: (to be us	sed for future a	nnual report notificati	ion)
For further	information c	oncerning this matter, ple	ease call:		
	MARIA DU		813	787-2958	
	Nai	me of Person		Daytime Telephon	e Number
Enclosed	is a check for	the following amount:			
\$125.00 F	Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certifi	00 Filing Fee & ed Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regis Divis P.O.	ng Address tration Section ion of Corporations Box 6327 hassee, FL 32314		Street Address Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

3000 ARMENIA AVENUE 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:

3000 N. ARMENIA AVE	3000 N. ARMENIA AVE #C
TAMPA, FLORIDA 33607	TAMPA, FLORIDA 33607

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

MADIA DUGADEE

(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:

MARIA DUGARTE	3	
	Name	
3000 N. ARMENIA	AVE#C	
Florida street addres	ss (P.O. Box NOT acce	ptable)
ТАМРА	FLORIDA	33607
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..

> MARIA DUGARTE
>
> Digitally signed by MARIA DUGARTE
>
> Ob: con-MARIA DUGARTE, o. ou,
> email-mdugarte! @outlook.com, c=US
> Date: 2015.06.01 10-9506-04300* Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

Page 1 of 2

<u> </u>		Name and Address:	
'AMBR" = Au 'MGR" = Man	thorized Member		
MGR — Man	ager	MARIA DUGARTE	
		3000 N. ARMENIA AVE #C	
		TAMPA FLORIDA 33607	
			_
	10.00		
			-
Use attachmer	nt if necessary)		
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