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06/12/15

COVER LETTER

	egistration Sivision of Co				
SUBJECT	••	JVC FRA	NCO 10, LLC		
SOBJECT	•	Name of Li	mited Liabilit	y Company	-
The enclos	sed Articles o	f Organization and fce(s) a	re submitted f	or filing.	
Please retu	ırn all corresp	oondence concerning this n	natter to the fo	llowing:	
			Nicola Branc	ciforte	•
			Name of I	Person	
		Ŋ	/C FRANCO	10, LLC	
			Firm/Con	npany	
		e e	501 West Flag	ler Street	
			Addre	SS	
			Miami, FL 3	3130	
			City/State and min@jvcfranc	-	
		E-mail address: (to be use			ion)
For further i	information c	oncerning this matter, plea	se call:		
	Nic	ola Branciforte	786	409 - 6896	
	Na	at (at (at (at (Area Code	Daytime Telephon	e Number
Enclosed i	s a check for	the following amount:			
\$125.00 F		\$130.00 Filing Fee & Certificate of Status	Certifie	Filing Fee & d Copy (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

JVC FRANCO				
(Mu	ist end with the words "Limite	d Liability Company	, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and s	street address of the principal	office of the Limited	Liability Company is:	
<u>P</u>	Principal Office Address:		Mailing Address:	
601 West Flag			West Flagler Street	
Miami, FL 33	3130	<u>Miai</u>	ni, FL 33130	
·	vith an active Florida registration a street address of the registere Nicola Branciforte	d agent are:		r
·	a street address of the registere	r		
·	a street address of the registere Nicola Branciforte 601 West Flagler St	d agent are: Name		
·	a street address of the registere Nicola Branciforte 601 West Flagler St	d agent are:	cceptable)	
·	Nicola Branciforte 601 West Flagler St Florida street addre	d agent are: Name	cceptable)	
·	Nicola Branciforte 601 West Flagler St Florida street addre	d agent are: Name reet ss (P.O. Box NOT ac	•	

(CONTINUED)

Page 1 of 2

15 1111 10 PM 4: 3"

SECRE IAK I CORPORATION

AIVIBK = A	uthorized Member	Name and Address:
"MGR" = Mai		
		······································
MGR		Nicola Branciforte
	······································	601 West Flagler
		Miami, FL 33130
MGR		Rafael Belloso
MOK		601 West Flagler Street
		Miami, FL33130

<u>AMBR</u>		JVC Franco, LLC
		(0) West Flagler Street
		Miami, FL 39130
(Use attachme	e date, if other than the date of	filing: .(OPTIONAL)
TICLE V: Effective an effective date is l date of filing.) ote: If the date insertions.	isted, the date must be speci-	et the applicable statutory filing requirements, this date will not be listed
RTICLE V: Effective an effective date is le date of filing.) ote: If the date insertions.	isted, the date must be speci- ted in this block does not mee we date on the Department of	fic and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed
an effective date is It date of filing.) ote: If the date inserte document's effective RTICLE VI: Other pro-	isted, the date must be speci- ted in this block does not mee we date on the Department of rovisions, if any.	fic and cannot be more than five business days prior to or 90 days afte et the applicable statutory filing requirements, this date will not be listed State's records.
an effective date is It date of filing.) ote: If the date inserted document's effective RTICLE VI: Other process.	isted, the date must be speci- ted in this block does not mee we date on the Department of	fic and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed
an effective date is I date of filing.) ote: If the date inserte document's effective tricker process.	isted, the date must be speci- ted in this block does not mee we date on the Department of revisions, if any. SIGNATURE: Signature of a mem (In accordance with section constitutes an affirmation u I am aware that any false in	fic and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed State's records.

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

ARTICLE IV-

Page 2 of 2

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)

Typed or printed name of signee