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SECRETARY OF STAIL SECRETARY OF CORPORATION OF CORPORATION

n 06/16/15

## **COVER LETTER**

	egistration S ivision of Co					
SUBJECT	Nicholas	Maruri Golf, L.L.C.				
SOBJECT	•	Name of	Limited Liabi	lity Company		
The enclos	ed Articles o	f Organization and fee(s)	are submitted	d for filing.		
Please retu	rn all corresp	ondence concerning this	matter to the	following:		
	Angel Mar	uri				
			Name of	f Person	11000000	
			Firm/Co			
	8700 SW 79th Place					
	Address					
	Miami, FL 33143					
	avmaruri@g	gmail.com	City/State ar	nd Zip Code		
-		E-mail address: (to be us	sed for future	annual report notifica	ation)	
For further in	nformation co	oncerning this matter, ple	ase call:			
	Angel Marı	uri at (	305	975-7704		
	Nan	ne of Person	Area Code	Daytime Telepho	ne Number	
Enclosed is	a check for t	he following amount:				
\$125.00 Fi	ling Fee	\$130.00 Filing Fee & Certificate of Status	Certifi	00 Filing Fee & led Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regist Divisi P.O. E	ng Address ration Section on of Corporations Box 6327 assee, FL 32314		Street Address Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	ter Circle	

## ARTIÇLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Nicholas Maruri Golf, L.L.C.  (Must end with the words "Limit	red Liability Company, "L.L.C.," or "LLC.")
CIETI Add	
CLE II - Address: uailing address and street address of the principal	office of the Limited Liability Company is:
•	, ,
Principal Office Address:	Mailing Address:
8700 SW 79th Place	8700 SW 79th Place

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

Angel Maruri		
	Name	
8700 SW 79th Pla	ace	
Florida street addr	ess (P.O. Box <u>NOT</u> ac	cceptable)
Miami	FL	33143
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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15 III 12 PM L: 36

The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager AMBR Nicholas Maruri 522 Kavannagh Place Las Vegas, NV 89123 (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.

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.)

Nicholas Maruri

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)

**REOUIRED SIGNATURE:** 

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