

6/25/2015
FAX AUDIT NO.: H150001567203
Division of Corporations
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L 15000108896

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(((H150001567203)))



H150001567203ABC.

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : MICHAEL J. FREEMAN, P.A.
Account Number : 07272000142
Phone : (305)442-1567
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
SANJER OF WYNWOOD LLC**

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

JUN 26 2015

S. GILBERT

Electronic Filing Menu
FAX AUDIT NO.: H150001567203

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

SANJER OF WYNWOOD LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: 1080 Mariner Drive
Key Biscayne FL 33149

Mailing Address: 1080 Mariner Drive
Key Biscayne FL 33149

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TALLAHASSEE, FLORIDA

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

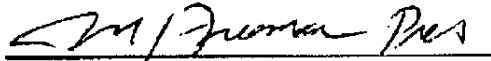
The name and the Florida street address of the registered agent are:

M.J. F. Registered Agent Corp.
Name

153 Sevilla Avenue
Florida Street Address (No P.O. Box)

Coral Gables, Fl 33134
City, State, and Zipcode

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
(Michael J. Freeman, President)

ARTICLE IV – Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

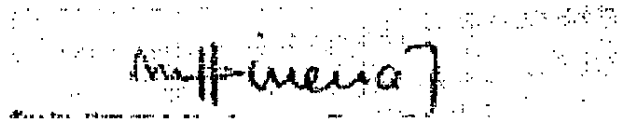
"AMBR" = Authorized Member
"MGR" = Manager

Name and Address:

MGR

Maria Jimena Rodriguez Perez Vargas
1080 Mariner Drive
Key Biscayne, FL 33149

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.)

Maria Jimena Rodriguez Perez Vargas, Manager

Type or print name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization & Designation of Registered Agent
\$30.00 Certified Copy (Optional)
\$5.00 Certificate of Status (Optional)

850-817-8381

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June 25, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MICHAEL J. FREEMAN, P.A.

SUBJECT: SANJER LLC
REF: W15000043727

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

of Wynwood

The document number of the name conflict is P11000106318 - SANJER/INC..

If you have any further questions concerning your document, please call (850) 245-6052.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

FAX Aud. #: E15000155650
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