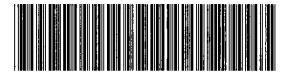
115000116535

· ·						
(Requestor's Name)						
(Address)						
, ,						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Business Ellat) Halloy						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



200274274652

07/06/15--01020--032 **160.00

OF CHE LARRY OF STATE OF A STATE OF CORPORATE A

2 07/13/15

COVER LETTER

	egistration Section ivision of Corporations							
SUBJECT	Firehouse Realty							
SUBJECT	Name of Limited Liability Company							
The enclos	ed Articles of Organization and fee(s) are submitted for filing.							
Please rett	rn all correspondence concerning this matter to the following:							
	Jose Batista							
	Name of Person							
	Firehouse Realty							
	Firm/Company							
	6830 White Oak Drive							
	Address							
	Miami Lakes, Florida. 33014							
	City/State and Zip Code Firehouse I realty@gmail.com							
	E-mail address: (to be used for future annual report notification)							
For further i	nformation concerning this matter, please call:							
	Jose Batista 305 986-0620 at ()							
	Name of Person Area Code Daytime Telephone Number							
Enclosed i	s a check for the following amount:							
	iling Fee \$\int_{\text{S130.00 Filing Fee & Certificate of Status}} \int_{\text{Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \text{ \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \text{S160.00 Filing Fee, Certified							
	Mailing Address New Filing Section Street Address New Filing Section							

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing 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 Liabil	lity Company is:					
Firehouse Realty, L	.LC.					
		l Liability Co	npany, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street	address of the principal c	office of the Li	imited Liability Company is:	:		
Principal Office Address:			Mailing Address:			
6830 White Oak Drive			6830 White Oak Drive			
Miami Lakes			Miami Lakes			
Florida, 33014			Florida, 33014			
another business entity with an The name and the Florida stree	· ·	r		_		
(010 MH); O 1 D ;						
6830 White Oak Drive Florida street address (P.O. Box NOT acceptable)						
	Miami Lakes	Fl.	33014	_		
	City	State	Zip			
Having been named as registered clace designated in this certificat further agree to comply with the p am familiar with and accept the d	e, I hereby accept the app provisions of all statutes p obligations of my position	nointment as re daying to the parties of the partie	gistered agent and agree to o proper and complete perform	act in this capacity. I nance of my duties, and I		
		(CONTINU	J ED)			

Page 1 of 2

5 JUL -6 PH 2: 42

ARTICLE IV- " The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager Aida Batista MGR 6830 White Oak Drive Miami Lakes, Florida 33014 (Use attachment if necessary) 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. REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Jose Batista

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)

Page 2 of 2