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**Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CLARA GIRALDO, P.A.
Account Number : I19990000017
Phone : (305)485-9300
Fax Number : (305)485-1098

15*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.
305 HOMES USA, LLC.**

Certificate of Status	1
Certified Copy	0
Page Count	04
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY
OF**

305 HOMES USA, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

305 HOMES USA, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**7821 NW 72 AVE
MIAMI, FL. 33166**

The mailing address shall be:

**7821 NW 72 AVE
MIAMI, FL. 33166**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

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

JAMES ROJAS SATIZABAL

7821 NW 72 AVE

Florida street address (P.O.BOX NOT acceptable)

MIAMI, FL. 33166

City, State, and Zip

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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**ARTICLE IV- MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

JAMES ROJAS SATIZABAL
7821 NW 72 AVE
MIAMI, FL. 33166

MANAGER

ALEXANDER RODRIGUEZ ILLERA
7821 NW 72 AVE
MIAMI, FL. 33166

MANAGER

(An additional article must be added if an effective date is requested)


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.)

JAMES ROJAS SATIZABAL

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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