

L15000129351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

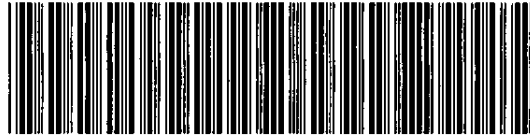
(Business Entity Name)

(Document Number)

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08/24/15--01031--021 \*\*72.50

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 30 2015

T. LEMIEUX

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Rancho Las Brisas, LLC.  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria Alberto  
Name of Person

Rancho Las Brisas  
Firm/Company

6300 SW 75 Ave  
Address

Miami, FL 33143  
City/State and Zip Code

marialberto@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Alberto at ( 786 ) 229-2563  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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SECRETARY OF STATE  
TALLAHASSEE, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 5, 2015

JOSE ALBERTO  
6300 SW 75 AVENUE  
MIAMI, FL 33143

SUBJECT: RANCHOS LAS BRISAS, LLC  
Ref. Number: W15000052811

We have received your document for RANCHOS LAS BRISAS, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We filed this entity in error and I have removed it from our database until we get it filed properly. You completed a Florida Profit Corporation form but listed the name as a limited liability company but paid the fees for a corporation. We need for you to complete the proper form. If it is going to be a corporation you will need to remove the LLC from the name. If it is going to be a limited liability company you are going to have to complete the proper form and pay the proper filing fees, we will need an additional \$72.50. Please make the proper corrections and return the document so I can process it for you.

I tried to send you an email but I got a message that you were not a customer. See the attached.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 615A00016502

15 AUG 20 PM 4:52

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Rancho Las Brisas, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Jose Alberto  
Maria Alberto

Mailing Address:

6300 SW 75 Ave, Miami, FL 33143  
6300 SW 75 Ave, Miami, FL 33143

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Maria Alberto  
Name

6300 SW 75 Ave  
Florida street address (P.O. Box **NOT** acceptable)

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.

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

MGR

**Name and Address:**

Jose Alberto  
6300 SW 75 Ave  
Miami, FL 33143

Maria I Alberto  
6300 SW 75 Ave  
Miami, FL 33143

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(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.

**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.

Maria I. Alberto  
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)