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Tower 101 • 101 NE 3<sup>rd</sup> Avenue, Suite 1410 • Fort Lauderdale, FL 33301 Office (954) 712 3070 • Fax (954) 337 3824 www.FloridaLitigationLawFirm.com

August 7, 2015

via U.S. Mail
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Florida New River, LLC

To Whom It May Concern:

I am the sole Trustee of the Maritza Trust, which will be the sole owner and authorized member of Florida New River, LLC. My address and telephone number are listed above. We request a Certified Copy and Certificate of Status. Please find a check in the amount of \$160.00 attached hereto.

Should you have any further questions, please do not hesitate to contact the undersigned.

Respectfully,

DAVID DI PIETRO, ESQ.

Enclosures as stated

## **COVER LETTER**

	legistration Section Division of Corporations	•		
SUBJECT	Florida New River, LLC			
SOBJECT		mited Liability	Company	
The enclos	sed Articles of Organization and fee(s) a	re submitted fo	or filing.	
Please retu	urn all correspondence concerning this n	natter to the fol	lowing:	
	David Di Pietro			
		Name of P	erson	
		E' /0		
	101 NIC 2nd Assessed Codes 1410	Firm/Com	pany	
	101 NE 3rd Avenue, Suite 1410	Addres	S	
	Fort Lauderdale, Florida 33301			
	david@floridalitigationlawfirm.com	City/State and	Zip Code	
•	E-mail address: (to be use	d for future and	nual report notificat	tion)
For further i	information concerning this matter, plea	se call:		
	David Di Pietroat (	954	712-3070	
	Name of Person	Area Code	Daytime Telephor	ne Number
Enclosed is	is a check for the following amount:			
\$125.00 F	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certified	Filing Fee & Copy (Copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	<u>s</u>	treet Address	

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:				د د
The name of the Limited Liabilit	ty Company is:			T m juni
				a
Florida New River, I				<u> </u>
(Must end	with the words "Limited Lia	bility Company, "L	L.C.," or "LLC.")	
ARTICLE II - Address:				91
The mailing address and street a	ddress of the principal office	of the Limited Lia	bility Company is:	
Dalasta	al Office Address:		Mailing Address:	•
Princip				
17555 Atlantic Boule	evard, #702	17555 A	Atlantic Boulevard, #702	
17555 Atlantic Bould Sunny Isles Beach, For ARTICLE III - Registered Age (The Limited Liability Company another business entity with an another business entity with anot	ent, Registered Office, & For cannot serve as its own Regactive Florida registration.)	Sunny Is Sun	sles Beach, Florida 33160 Signature:	al or
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17555 Atlantic Boule	ent, Registered Office, & For cannot serve as its own Regactive Florida registration.) address of the registered age  David Di Pietro  No. 101 NE 3rd Avenue, Sui	Sunny Istegistered Agent's gistered Agent. You ent are:	sles Beach, Florida 33160  Signature:  n must designate an individu	al or

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title:	Name and Address:		
"AMBR" = Authorized Member		13 ~	5
"MGR" = Manager		, <del>v</del>	
AMBR	Maritza Trust		<u> </u>
	17555 Atlantic Boulevard, #702		
	Sunny Isles Beach, Florida 33160		<u> </u>
		-n-	
MGR	David Garces	٦.	<u>:</u>
	De los Tecanes 341 y Gaviotas	mq me	ىرى
	Quito, Ecuador		<del></del>
		2.0	- F
	<del></del>		
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ARTICLE IV-

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