Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000203999 3)))



H150002039993ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:	Division of Co	rporations	4	
	Fax Number	: (859)617-6381	ب :: ﴿	1
From:	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.		5
29		: 120000000019	がいる	>
\sim	Phone	: (305)552-5973	-de	
i j	· Fax Number	: (305)675-5944	୍ର 🚉	
:FI: ::::::::::::::::::::::::::::::::::	•		,	
∴ <mark>**Ent</mark>	er the email addre	ess for this business entity to be used for for follows. Enter only one email address please.**	iture ယ	
Si H	william i chair c mar	wanger and, one, one and a con process		
WI.	Email Address:		,	
75	شر			

FLORIDA LIMITED LIABILITY CO. 216 INVESTMENT LLC

Certificate of Status	1	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$130.00	

Electronic Filing Menu

Corporate Filing Menu

Help

AUG 2 5 2015

S. GILBERT

H15000203999

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

216 Investment LLC

ARTICLE II - Address:

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

14386 SW 15 ST MILLIE TI 33184

ARTICLE III - Registered Agent. Registered Office:

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

ORLANDO RODRIGUEZ 14386 SW 15 ST MIAMI FL 33184

ARTICLE IV-

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

Delawoo Ropriquez (AMBR) MAYDA R. RODRIGUEZ (AMBR)

Page 1 of 2

H15000203999

Required Signatures:

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.

ORLANDO RODRIGUEZ

Typed or printed name of signee

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 (REQUIRED)