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FAX No.

P. 001

9/9/2015

Division of Corporations

Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

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**FLORIDA LIMITED LIABILITY CO.
REMAH INVESTMENTS GROUP, LLC.**

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
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FAX No.

P. 002

850-617-6381

9/10/2015 6:00:57 PM PAGE 1/001 Fax Server



September 10, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EXPRESS

SUBJECT: REMAE INVESTMENTS GROUP, LLC
REF: W15000059842

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Section 607.0120(4), 617.01201, or 605.0206, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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) 245-6052.

Carol Mustain
Regulatory Specialist II

FAX Aud. #: H15000216966
Letter Number: 615A00019154

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15 SEP 11 AM 2:15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDAREMAH INVESTMENTS GROUP, LLC

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

ARTICLE II - Address:

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

Principal Office Address:Mailing Address:8021 SW 179 STREET
PALMETTO BAY, FLORIDA 331578021 SW 179 STREET
PALMETTO BAY, FLORIDA 33157

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:


VILMA L. CABRERA

Name

8021 SW 179 STREETFlorida street address (P.O. Box **NOT** acceptable)

| | | |
|---------------------|----------------|--------------|
| <u>PALMETTO BAY</u> | <u>FLORIDA</u> | <u>33157</u> |
| 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.



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**Name and Address:**VILMA L. CABRERA8021 SW 179 STREETPALMETTO BAY, FLORIDA 33157

(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, P.S.VILMA L. CABRERA

Typed or printed name of signer

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)