

9/28/2015

W1500023233909
THERREL
Division of Corporations

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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.

(((H15000232339 3)))



H150002323393ABC

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

To:

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

From:

Account Name : THERREL BAISDEN, P.A.
Account Number : I20140000065
Phone : (305)371-5758
Fax Number : (305)371-3178

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

15 SEP 29 AM 3:06

**FLORIDA LIMITED LIABILITY CO.
LAS CABANAS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

15 SEP 29 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

09/29/2015 12:16
850-817-8381

3053589656

THERREL
9/29/2015 8:03:35 AM PAGE

1/001 Fax Server
PAGE 01/05



September 29, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

THERREL BAISDEN, P.A.

SUBJECT: LAS BANANAS, LLC
REF: W15000064609

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.

Your company name contains special symbols/characters not contained on the English keyboard. Please remove these symbols from the name of your company.

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.

Jessica A Fason
Regulatory Specialist II

FAX Aud. #: H15000232339
Letter Number: 615A00020486

H150002323393

ARTICLES OF ORGANIZATION
FOR
LAS CABANAS, LLC

ARTICLE I
Name

The name of the Limited Liability Company is **LAS CABANAS, LLC.**

ARTICLE II
Address

The mailing address and street address of the principal office of the Limited Liability Company is: 8350 Sunset Drive, Miami, Florida, 33143.

ARTICLE III
Existence; Duration

This limited liability company shall have a perpetual existence, unless dissolved according to law, effective as of the 28th day of September 2015.

ARTICLE IV
Registered Agent

The street address of the initial registered office of the Limited Liability Company shall be Therrel Baisden, F.A., SunTrust International Center, One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131, and the name of the initial registered agent of the Limited Liability Company at that address is: Jonathan Feuerman, Esq.

15 SEP 29 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

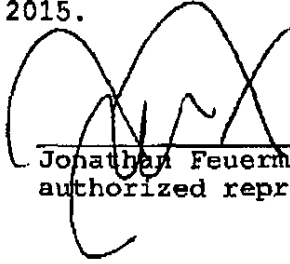
H150002323393

H150002323393

ARTICLE V
Manager-Managed Company

The Limited Liability Company is to be managed by one or more managers and is therefore a manager-managed company. The name and address of the initial manager of this company is: **TERESA PRADO FALCZYNSKI**, 8350 Sunset Drive, Miami, Florida, 33143; **PRISCILLA PRADO STROZE**, 8350 Sunset Drive, Miami, Florida, 33143; **FRANCISCO NILO PRADO**, 8350 Sunset Drive, Miami, Florida, 33143.

The undersigned authorized representative of the members of LAS CABANAS, LLC, hereby executes these articles of organization on this 28th day of September 2015.



Jonathan Feuerman,
authorized representative

H150002323393

H150002323393

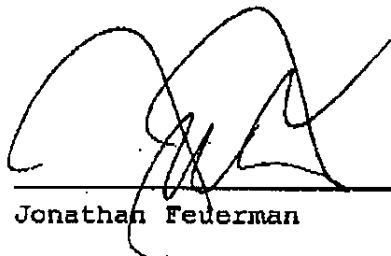
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT
IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is **LAS CABANAS, LLC.**
2. The name and the Florida street address of the registered agent and office are:

Jonathan Feuerman, Esquire
Therrel Baisden, P.A.
SunTrust International Center
One S.E. 3rd Avenue, Suite 2950
Miami, Florida 33131

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.


Jonathan Feuerman

W:\Prado\Las Cabanas, LLC\LLC Articles.wpd

H150002323393