# **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.

(((H15000270548 3)))



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 : CORP USA

Account Number : 072450003255

Phone : (305) 634-3694

Fax Number

: (305)633-9696

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

Email Address:	

### FLORIDA LIMITED LIABILITY CO. WINSTON TOWER 300 1417, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

NOV 1 3 2015 T. BROWN

https://efile.sunbiz.org/scripts/efilcovr.exe

11/12/2015

PAGE 01/03

CORPUSA

3696889908

71/12/2015 BIOS/21/11

H15000270548

saCP neuman lic

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I Namo

The name of the Limited Liability Company is:

WINSTON TOWER 300 1417, LLC

# ARTICLE II Address

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

### Principal Office Address:

Mailing Address:

231 174th Street, #718 Sunny Isles Beach, FL 33160 231 174<sup>th</sup> Street, #718 Sunny Isles Beach, FL 33160

# ARTICLE III Registered Agent, Registered Office & Registered Agent's Signature

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

Ira R. Shapiro 16375 NE 18<sup>th</sup> Avenue, Suite 225 North Miami Beach, FL 33162

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.

Ira R. Shapiro, Registered Agent

**L∀CE 05\03** 

CURPUSA

11/12/2012 00:47 305639696

# Management

The Limited Liability Company is to be managed by one or more managers, and is therefore a manager - managed company.

### ARTICLE V Persons Authorized to Manage and Control

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

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Aron Neuman

231 174th Street, #718

Sunny Isles Beach, FL 33160

MGR

Zipora Strobel-Neuman 231 174th Street, #718

Sunny Isles Beach, FL 33160

Aron Neuman, MGR

(In accordance with Section 603.0203(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 2.817.155, F.S.)

- 2 -