

Division of Corporations Electronic Filing Cover Sheet

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To:

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

From:

Account Name	:	EXPRESS CORPORATE	FILING	SERVICE	INC.
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P. 001

FAX No.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LA GRINGA REAL ESTATE INVESTMENTS LLC

(Must end with the words "Limited Liability Company, "L.L.C.," 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:
2692 SW 137 AVE	<u>2692 SW 137 AVE</u>
MIAMI, FL 33175	MIAMI, FL 33175

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:

AVEL A GONZAL	.EZ	
	Name	
2688 SW 137 AVE		
Florida street addre	ss (P.O. Box NOT a	cceptable)
MIAMI	FL	33175
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 nosition as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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FAX No.

ARTICLE IV-

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

 Title:
 Name and Address:

 "AMBR" = Authorized Member
 "JUAN MANUEL ULFE

 "MGR" = Manager
 JUAN MANUEL ULFE

 2692 SW 137 AVE
 MIAMI, FL 33175

 MIAMI, FL 33175
 MIAMI, FL 33175

 (Use attachment if necessary)
 January 01, 2016 (OPTIONAL)

 ARTYCLE V: Effective date, if other than the date of filing:
 January 01, 2016 (OPTIONAL)

 (If an effective date, if other than the date of filing:
 January 01, 2016 (OPTIONAL)

 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date of filing: If the date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

<u>REOUIRE</u>	DSIGNATURE: MAN ULL
	Signature of a member or an authorized representative of a member.
	This document is executed in accordance with section 603.0203 (1) (b), Florida Statute
	I am aware that any false information submitted in a document to the Department of Sta constitutes a third degree felony as provided for in \$,817,155, F.S.
	JUAN MANUEL ULFE
	Typed or printed name of signee
	<u>Filing Fees:</u>
\$125 <u>0</u> 0 F	ling Fas for Articles of Argenization and Designation of Designand Agent
	lling Fee for Articles of Organization and Designation of Registered Agent ertified Copy (Optional)