

10/04 033 05:32

L15000195409

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.

(((H15000277679 3)))



H150002776793ABCB

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
1929 NW, LLC**

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

15 NOV 23 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

J
11/24/15

10/04/2033 05:31
850-617-6381

11/23/2015 9:44:33 AM PAGE 1/001 Fax Server

#2244 P.001/004

RECEIVED
15 NOV 23 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 23, 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: 1929 NW, LLC
REF: W15000076353

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

The document must contain both the street address of the principal office and the mailing address of the entity.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

FAX And. #: H15000277679
Letter Number: 415A00024628

15 NOV 23 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

H15000277679

FILED
15 NOV 23 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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", "LLC," or "LLC.")*

1929 NW, LLC.

ARTICLE II - Address:

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

M: P.O. BOX 14-4389
Coral Gables, FL 33114
P: 5700 SW 8 ST Suite 500 Miami FL 33144

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.)*

Nicolas Fernandez, P.A.
5700 SW 8 St, Suite 500
Miami, FL 33144

ARTICLE IV:

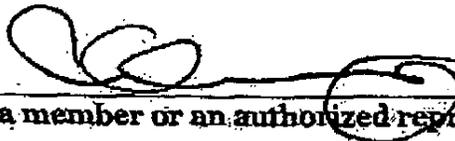
The name and title of each person authorized to manage and control the Limited Liability Company:

cesar alvarez - mgr.
P.O. BOX 14-4389
Coral Gables, FL 33114

H15000277679

H15000277679

Required Signatures:



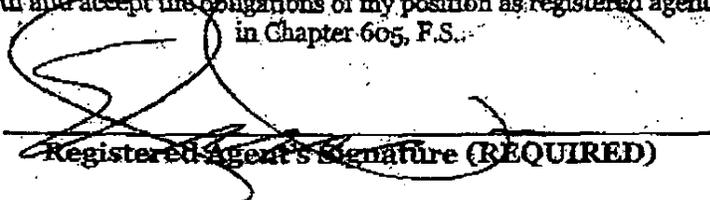
Signature of a member or an authorized representative of a member.

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.

Cesar Alvarez

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 NOV 23 AM 8:46

FILED

H15000277679