

# L16000006993

## 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.**

((H16000010562 3))



H160000105823ABCV

**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 : LAW OFFICE OF GERALD K. SCHWARTZ, P.A.  
Account Number : I20080000083  
Phone : (305) 673-1101  
Fax Number : (305) 673-5505

**\*\*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.  
1676 James, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 JAN 13 PM 1:45

FILED

01/13/2016

13:22 Beloff Parker Jacobs

(FAX)305 673 5505

P.002/004

(((H16000010567 3)))

**ARTICLES OF ORGANIZATION  
FOR  
1676 James LLC,  
a Florida limited liability company**

2016 JAN 13 PM 1:45  
F L L C  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

**ARTICLE I- NAME:**

The name of the limited liability company is: **1676 James, LLC.**

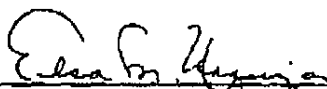
**ARTICLE II- ADDRESS:**

The address of its principal place of business, as well as the mailing address for this limited liability company is: **1676 James, LLC, c/o Elsa M. Urquiza, 227 E. Rivo Alto Drive, Miami Beach, Florida 33139.**

**ARTICLES III- REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE**

The name and the Florida address of the registered agent are: **Elsa M. Urquiza, 227 E. Rivo Alto Drive, Miami Beach, Florida 33139.**

Having been named as registered agent and to accept service of process for the above state 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.

  
\_\_\_\_\_  
Elsa M. Urquiza, Registered Agent

(((H16000010567 3)))

(((H16000010567 3)))

ARTICLE IV

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

**TITLE:**

**NAME AND ADDRESS:**

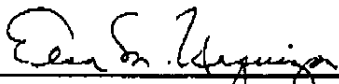
Manager

Elsa M. Urquiza  
227 E. Rivo Alto Drive  
Miami Beach, Florida 33139

ARTICLE -V - Effective Date, if other than the date of filing: \_\_\_\_\_(Optional)

ARTICLE- VI- Other provisions, if any.

REQUIRED SIGNATURE:



\_\_\_\_\_  
ELSA M. URQUIZA, Authorized Signature

*(In accordance with Section 605.0203 (1)(b), Florida Statute, 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 s817.155,F.S.)*

(((H16000010567 3)))