

01/21/2016

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Division of Corporations

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Florida Department of State  
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To:

Division of Corporations  
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Account Name : STOLZENBERG, GELLES & FLYNN, LLC  
Account Number : I20100000018  
Phone : (305) 961-1450  
Fax Number : (305) 423-3979

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

Email Address: roland@windsor-capitol.com

FLORIDA LIMITED LIABILITY CO.  
Windsor Investments (1664 SW 9th Street), LLC

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**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE I  
NAME**

The name of the Limited Liability Company is:

Windsor Investments (1664 SW 9<sup>th</sup> Street), LLC

**ARTICLE II  
ADDRESS**

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

Mailing Address:  
1533 Sunset Drive, Suite 228  
Coral Gables, Florida 33143

Principal Office Address:  
1533 Sunset Drive, Suite 228  
Coral Gables, Florida 33143

**ARTICLE III  
REGISTERED AGENT AND REGISTERED OFFICE**

The name and street address of the registered agent is:

Keith H. Stolzenberg, Esq.  
Stolzenberg Gelles Flynn & Arango, LLP  
1401 Brickell Avenue, Suite 825  
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.*

  
Keith H. Stolzenberg, Esq., Registered Agent

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**ARTICLE IV  
MANAGEMENT**

The Limited Liability Company is to be managed by manager(s) and is, therefore, a manager-managed company.

**MGR:**  
*Manager*

**Roland DiGasbarro**  
1533 Sunset Drive, Suite 228  
Coral Gables, FL 33143

  
**Keith H. Stolzenberg, Esq., Authorized Representative**

(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.)

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