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SECRETARY OF STATE ONVISION OF CONFORATIONS

FEB 1 6 2016

S. PRATHER

COVER LETTER TO: **Registration Section Division of Corporations** SUBJECT: Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Trevor B. Eldredge Name of Person Law Office of Trevor B. Eldredge, LLC Firm/Company PO Box 768 Address Kaysville, Utah 84037 City/State and Zip Code tatygaspar1@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Trevor Eldredge Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address **Street Address** New Filing Section **New Filing Section** División of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABÍLITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end	with the words "Limited	d Liability Company, '	L.L.C.," or "LLC.")	
ARTICLE II - Address:				
he mailing address and street a	ddress of the principal of	office of the Limited L	iability Company is:	
<u>Princip</u>	al Office Address:		Mailing Address:	
4770 SW 5 St.				
Miami, FL 33134				
The Limited Liability Company	cannot serve as its own	n Registered Agent. Yo	s Signature: ou must designate an individual or	
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registration	n Registered Agent. Yo on.)	s Signature:	16 FEB
ARTICLE III - Registered Agr The Limited Liability Company nother business entity with an a The name and the Florida street	cannot serve as its own active Florida registration	n Registered Agent. Yo on.) d agent are:	s Signature:	77
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registration address of the registered	n Registered Agent. Yo on.) d agent are:	s Signature:	FEB 16
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registration address of the registered	n Registered Agent. Yoon.) d agent are:	s Signature:	FEB 16 PM
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registration address of the registered Luis Miranda Herna 4770 SW 5 St.	n Registered Agent. Yoon.) d agent are:	s Signature: ou must designate an individual or	FEB 16
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registration address of the registered Luis Miranda Herna 4770 SW 5 St.	n Registered Agent. Yo on.) d agent are: ndez Name	s Signature: ou must designate an individual or	FEB 16 PM 3:

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.

Luis Miranda Hernandez

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MGR	Luis Miranda Hernandez	_
	4770 SW 5 St. Miami, FL 33134	_
	Mianii, FL 53134	-
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12 No. of 1984

REOUIRED SIGNATURE:

ARTICLE VI: Other provisions, if any.

Luis Miranda Hernandez

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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Luis Miranda Hernandez

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

the document's effective date on the Department of State's records.