1160000072311

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



600284358776

04/11/16--01018--017 **125.00

16 APR 11 PH 2: 57

SECRETARY OF STALE

COVER LETTER

	egistration Section vision of Corporations		_
SUBJECT	BRICKS AND BEACH LLC		ty Company
SOBJECT		Limited Liabili	ty Company
The enclose	ed Articles of Organization and fee(s)) are submitted	for filing.
Please retur	n all correspondence concerning this	matter to the fo	ollowing:
	CARLOS GUSTAVO CABRERA	GOMEZ	
		Name of	Person
	BRICKS AND BEACH LLC		
		Firm/Co	mpany
	66 W FLAGLER ST #1202		
		Addre	ess
	MIAMI, FL 33130		
i	enbaber@casoca-corp.com	City/State and	1 Zip Code
<u>-</u>	<u> </u>	sed for future a	nnual report notification)
For further in	formation concerning this matter, ple	ease call:	
	CARLOS CABRERA	305	3220632
•	at Name of Person	Area Code	Daytime Telephone Number
Enclosed is	a check for the following amount:		
\$125.00 Fil	ing Fee \$130.00 Filing Fee & Certificate of Status	Certific	of Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	1	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BRICKS AND BEACH LLC		
(Must end with the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		;
he mailing address and street address of the principal office	of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	•
Principal Office Address: 66 W FLAGLER ST #1202	Mailing Address: 66 W FLAGLER ST #1202	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent, You must design

(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:

ARTICLE I - Name:

CARLOS GUSTA	AVO CABRERA GOM	IEZ
	Name	, ,
66 W FLAGLER	ST #1202	
Florida street add	lress (P.O. Box NOT ac	cceptable)
MIAMI	FL	33130
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 retaing 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)

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	CARLOS GUSTAVO CABRERA GOMEZ
AIVIDK	66 W FLAGLER ST #1202, MIAMI, FL 33130
	00 W 1 L. RODEN OF W 1202, WHINKIN, 1 L 33 130
	ž
	•
E V: Effective date, if other than the ective date is listed, the date must of filing.)	e date of filing:
ective date is listed, the date must of filing.)	be specific and cannot be more than five business days prior to or 90 da not meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart	be specific and cannot be more than five business days prior to or 90 da not meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart	be specific and cannot be more than five business days prior to or 90 da not meet the applicable statutory filing requirements, this date will not be
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 da not meet the applicable statutory filing requirements, this date will not be
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be ment of State's records.
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is early and the comment of the co	not meet the applicable statutory filing requirements, this date will not be ment of State's records. a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes.
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is early am aware that any	not meet the applicable statutory filing requirements, this date will not be ment of State's records. a member or an authorized representative of a member.
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of This document is earn aware that any constitutes a third of the control of the constitutes at the constitute	not meet the applicable statutory filing requirements, this date will not be ment of State's records. The amember of an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. The false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S. SUSTAVO CABRERA GOMEZ
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of This document is earn aware that any constitutes a third of the control of the constitutes at the constitute	not meet the applicable statutory filing requirements, this date will not be ment of State's records. The a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. To false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.

Page 2 of 2