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To: Division of Corporations
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From: Account Name : CLARA GIRALDO, P.A.
Account Number : I1999000017
Phone : (305)485-9300
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA LIMITED LIABILITY CO. 1258 MARSEILLE DRIVE,LLC.

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

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16 MAY -5 AM 10:33

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1258 MARSEILLE DRIVE, LLC

ARTICLE I - NAME

The name of the Limited Liability Company is:

1258 MARSEILLE DRIVE, LLC

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**7220 RUE NOTRE DAME
MIAMI BEACH FL, 33141**

The mailing address shall be:

**7220 RUE NOTRE DAME
MIAMI BEACH FL, 33141**

16 MAY - 5 AM ID: 33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

The name and the Florida street address of the registered agent are:

ESTEBAN AGUILA

**7220 RUE NOTRE DAME
Florida street address (P.O.BOX NOT acceptable)
MIAMI BEACH FL, 33141
City, State, and Zip**

H160001127373

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

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or mbre managers and is, therefore, a manager - managed company.

**ESTEBAN AGUILA
7220 RUE NOTRE DAME
MIAMI BEACH FL, 33141**

MANAGER

(An additional article must be added if an effective date is requested)



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.)

ESTEBAN AGUILA

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE FLORIDA
16 MAY -5 AM 10:33

**CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 485-9300**