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Florida Department of State
Division of Corporations
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Email Address: _____

FLORIDA LIMITED LIABILITY CO.
ENTERPRISE GROUP OF MADEIRA, LLC

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

16 AUG -5 PM 4:48

ENTERPRISE

8/8/16

H 16000191925

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ENTERPRISE GROUP OF MADEIRA, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

20000 EAST COUNTRY CLUB DRIVE APT 816
AVENTURA, FLORIDA 33180

Mailing Address:

20000 EAST COUNTRY CLUB DRIVE APT 816
AVENTURA, FLORIDA 33180

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

JOSE DE PAULO RODRIGUES

Name

20000 EAST COUNTRY CLUB DRIVE APT 816

Florida street address (P.O. Box NOT acceptable)

AVENTURA FLORIDA 33180

City State Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 AUG -5 AM 9:09

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 (REQUIRED)

(CONTINUED)

H 16000191925

H16000191925

ARTICLE IV-

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

Title:
"AMBR" = Authorized Member
"MGR" = Manager
MGR

Name and Address:

JOSE DE PAULO RODRIGUES
20000 EAST COUNTRY CLUB DRIVE APT 816
AVENTURA, FLORIDA 33180

MGR

ORO BENZAQUEN DE DE PAULO
20000 EAST COUNTRY CLUB DRIVE APT 816
AVENTURA, FLORIDA 33180

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statute.
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.

JOSE DE PAULO RODRIGUES
Typed or printed name of signee

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TALLAHASSEE
FLORIDA
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