

L16000158365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
FALL HARBOR, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE LOVE BELOW LLC

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:

KELLY TORRES

Name of Person

LAW OFFICE OF KELLY TORRES

Firm/Company

3250 NE 1ST AVENUE, #305

Address

MIAMI, FLORIDA 33137

City/State and Zip Code

SHERMAN@DEBONAIRLAWGROUP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHERMAN DAVIS, JR.

855

9003326

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☐

\$130.00 Filing Fee &
Certificate of Status

☒

\$155.00 Filing Fee &
Certified Copy

(additional copy is enclosed)

☐

\$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

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2016

LAW OFFICE OF KELLY TORRES
3250 NE 1ST AVENUE, #305
MIAMI, FL 33137

SUBJECT: THE LOVE BELOW LLC
Ref. Number: W16000056863

We have received your document for THE LOVE BELOW LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist II

Letter Number: 916A00017280

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE LOVE BELOW 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:

138 NE 50TH STREET
MIAMI, FLORIDA 33137

Mailing Address:

138 NE 50TH STREET
MIAMI, FLORIDA 33137

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:

KELLY TORRES

Name

3250 NE 1ST AVENUE, #305

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

MIAMI

FL

33137

City

State

Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Kelly Torres
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

HOME TEAM-MUSIC LLC

138 NE 50TH STREET

MIAMI, FLORIDA 33137

AMBR

LOUIS-BERNARD ADAM

20124 SW 79TH COURT

CUTLER BAY, FLORIDA 33189

AMBR

JUNIL KIM

7904 WEST DRIVE, UNIT 104

NORTH BAY VILLAGE, FLORIDA 33141

AMBR

MARIO DE LOS SANTOS

8933 NW 147TH TERRACE

MIAMI LAKES, FLORIDA 33018

(Use attachment if necessary)

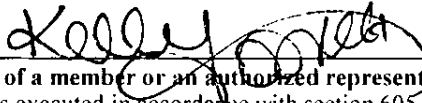
ARTICLE V: Effective date, if other than the date of filing: 7/29/2016, (OPTIONAL)

(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 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.

KELLY TORRES

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)

ATTACHMENT

SUBJECT: THE LOVE BELOW LLC

ARTICLE IV (cont'd)

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

Title:

Name and Address:

AMBR

ALAN MENESES
6326 SW 165TH PLACE
MIAMI, FLORIDA 33193

AMBR

JORGE GUTIERREZ
8024 SW 135TH COURT
MIAMI, FLORIDA 33183

AMBR

JERRY HILLS
11241 SW 152ND PLACE
MIAMI, FLORIDA 33196

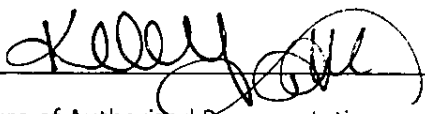
Authorized Representative

The Law Offices of Sherman Davis, Jr., PLLC.
830 THIRD AVENUE, 5TH FLOOR
NEW YORK, NEW YORK 10022

Authorized Representative

LAW OFFICE OF KELLY TORRES
3250 NE 1ST AVENUE, #305
MIAMI, FLORIDA 33137

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



Signature of Authorized Representative