## Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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## FLORIDA LIMITED LIABILITY CO. 8174 DORAL ISLES NORTH LLC.

Certificate of Status	1
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	I - Name:					
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ARTICLE The name Liability C	and title of each	person author	rized to man	age and co	ontrol the L	imited
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Required Signatures:

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, I am aware that any false information submitted in a document to the Department of States constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

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)