

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000233798 3)))



H160002337983ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : CORP USA

Account Number : 072450003255 Phone : (305)634-3694

Fax Number : (305) 633-9696

ess entity to be used for future

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Mail Address:

FLORIDA LIMITED LIABILITY CO. HADDAD BLUMETTI HOLDINGS LLC

| Certificate of Status | U |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$155.00 |

110052

Electronic Filing Menu

Corporate Filing Menu

Help

9/20/2016



HWWW333798

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liab | ility Company is: | | | |
|---|---|---|---|--|
| HADDAD BLUM | ETTI HOLDINGS LLC nd with the words "Limited | Liebility Company | "I I C " oc" I C") | |
| ARTICLE II - Address: The mailing address and stree | | | | |
| <u>Prine</u> | cipal Office Address: | | Mailing Addr | ese: |
| 1985 NW 88th Ct. Ste. 101 Doral, FL 33172 | | Sam | к | |
| ARTICLE III - Registered A (The Limited Liability Compo another business entity with a | iny cannot serve as its own | Registered Agent. | | lividual or |
| The name and the Florida stre | et address of the registered | agent are: | | |
| | Jean Haddad | · | | |
| | | Name | | |
| | 1985 NW 88th Ct, St | e. 101 | | |
| | Florida street address | | ecceptable) | |
| | Doral Fl 33172_ | | | |
| | City | State | Zip | |
| Having been named us register place designated in this certification further agree to comply with the am familiar with and accept the | ate, I hereby accept the appo e provisions of all statutes re e obligations of my position of | clating to the proper as registered agent cered Agent's Signa | red agent and agree to uct it r and complete performanc as provided for in Chupter ture (REQUIRED) | in this capacity. I se of my duties, and I 605, F.S. |
| | | (CONTINUED) | | SEP 20 I |
| | | Page 1 of 2 | | 3557 (Pr 357 (Pr 3 BH 8: |

FILED

16 SEP 20 PM 8: 15
FIRSTMANY OF STATE
ALLAHASSEE, FLURIDA

| <u>Titler</u> "AMBR" = Authorized Member "MOR" = Manager | Name and Address: |
|--|--|
| MGR | Jean Haddad |
| | 1985 NW 88th Ct. Ste. 101 |
| | Doral Fl 33172 |
| | |
| | |
| | |
| · | |
| | |
| | |
| | |
| | |
| | |
| | |
| (Use attachment if necessary) | |
| CLEV: Effective date, if other than the date of filing | g:(OPTIONAL) |
| CICLE V: Effective date, if other than the date of filing to effective date is listed, the date must be specific at late of filing.) | g: |
| CICLEV: Effective date, if other than the date of filing in effective date is listed, the date must be specific as late of filing.) e: If the date inserted in this block does not meet the | nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be |
| CICLE V: Effective date, if other than the date of filing in effective date is listed, the date must be specific at late of filing.) e: If the date inserted in this block does not meet the document's effective date on the Department of State | nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be |
| CICLEV: Effective date, if other than the date of filing in effective date is listed, the date must be specific as late of filing.) e: If the date inserted in this block does not meet the | nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be s's records. |
| CICLE V: Effective date, if other than the date of filing in effective date is listed, the date must be specific at late of filing.) e: If the date inserted in this block does not meet the document's effective date on the Department of State | nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be |
| CLEV: Effective date, if other than the date of filing a effective date is listed, the date must be specific as late of filing.) e: If the date inserted in this block does not meet the document's effective date on the Department of State | nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be s's records. |
| CICLE V: Effective date, if other than the date of filling in effective date is listed, the date must be specific at late of filling.) e: If the date inserted in this block does not meet the document's effective date on the Department of State IICLE VI: Other provisions, if any. | nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be s's records. |
| ICLE V: Effective date, if other than the date of filing a effective date is listed, the date must be specific as late of filing.) E: If the date inserted in this block does not meet the document's effective date on the Department of State | nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be s's records. |
| CICLE V: Effective date, if other than the date of filing a effective date is listed, the date must be specific as late of filing.) E: If the date inserted in this block does not meet the document's effective date on the Department of State CICLE VI: Other provisions, if any. REOHIRED SIGNATURE: | nd cannot be more than five business days prior to or 90 du applicable statutory filing requirements, this date will not be 's records. |
| ICLE V: Effective date, if other than the date of filing a effective date is listed, the date must be specific as late of filing.) E: If the date inserted in this block does not meet the document's effective date on the Department of State ICLE VI: Other provisions, if any. REQUIRED SIGNATURE: | and cannot be more than five business days prior to or 90 du applicable statutory filing requirements, this date will not be be records. |
| ICLE V: Effective date, if other than the date of filing a effective date is listed, the date must be specific as ate of filing.) If the date inserted in this block does not meet the document's effective date on the Department of State ICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of this document is executed in a 1 am aware that any false inform | nd cannot be more than five business days prior to or 90 du applicable statutory filing requirements, this date will not be 's records. |
| ICLE V: Effective date, if other than the date of filing a effective date is listed, the date must be specific as ate of filing.) If the date inserted in this block does not meet the locument's effective date on the Department of State ICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of this document is executed in a 1 am aware that any false inform | or an authorized representative of a member. In additional section 605.0203 (1) (b), Florida Statutes. In a submitted in a document to the Department of State |

Page 2 of 2