

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.

(((H16000240044 3)))



H160002400443ABCV

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 : GREENSPOON MARDER, P.A.

Account Number : 076064003722 Phone : (888)491-1120 Fax Number : (954)343-6962

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

Email Address:_

tom fernandez D bell south next

6 SEP 27 PH 1: 05
Post of grand Co

FLORIDA LIMITED LIABILITY CO. MIA'S PLACE #2, LLC

The Markett Manufacture Company of the American States of the Company of the Comp	
Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

16 SEP 27 AM 9: 15
SECURITARY OF STATE
SECURITARY OF STATE

Electronic Filing Menu

Corporate Filing Menu

ì

Help

D O'KEEFE SEP 28 2016 9/27/2016 12:42:42 PM PAGE 2/004 Fax Server

ARTICLES OF ORGANIZATION

OF

MIA'S PLACE #2, LLC

THE UNDERSIGNED, pursuant to the provisions of Chapter 605 of the Florida Revised Limited Liability Company Act, for the purpose of forming a Florida Limited Liability Company (the "Company") under the laws of the State of Florida does set forth the following:

ARTICLE I - Name:

The name of the Limited Liability Company is MIA'S PLACE #2, LLC.

ARTICLE II - Duration:

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE III - Address:

The mailing address is 4118 SW 195th Terrace, Miramar, Florida 33029 and street address of the principal office of the Limited Liability Company is 8790 SW 9th Terrace, Unit B, Miami, Florida 33174.

ARTICLE IV - Registered Agent:

The name and address of the Initial registered agent for this Limited Liability Company Is:

Monique M. Sadarangani, Esq., 2255 Glades Road, Suite 400E, Boca Raton, Florida 33431

ARTICLE V - Management:

Initially, the Company shall be manager managed and the initial manager shall be as listed below; provided, that the Company may determine, from time to time, to become member managed or change the manager from time to time and the Company reserves the right to update such information through its annual report filings, amendments to the Company's operating agreement, or as otherwise provided by applicable law:

Tomas Fernandez 4118 SW 195th Terrace, Miramar, Florida 33029

Whereof, the undersigned authorized representative of the member has executed these

Articles the 27 day of September 2016.

Monique M. Saderangan Authorized Rennesentative

> 16 SEP 27 AM 9: 15 SECRETAKT OF STATE

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the Limited Liability Company is:
 - Mia's Place #2, LLC
- 2. The name and address of the registered agent and office is:

Signature)

Monique M. Sadarangani 2255 Glades Road, Suite 400E Boca Raton, Florida 33431

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.

September 27, 2016

(Date)

6 SEP 27 AM 9: 15 EURETAKT OF STATE LLAHASSEF FLORING