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COVER LETTER

Division of Corporations			
SUBJE	PORSCHE 2801 LLC.		
30000	Name of Limited Liability Company		
The end	losed Articles of Organization and fee(s) are submitted for filing.		
Please r	eturn all correspondence concerning this matter to the following:		
	DAVID AVAN		
	Name of Person		
	Firm/Company		
	7330 NW 36 AVENUE		
	Address		
	MIAMI, FL 33147		
City/State and Zip Code mavan218@gmail.com			
	E-mail address: (to be used for future annual report notification)		
For furth	er information concerning this matter, please call:		
	DAVID AVAN 305 836-4040 at ()		
	Name of Person Area Code Daytime Telephone Number		
Enclose	d is a check for the following amount:		
\$ 125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
PORSCHE 2801 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:	Mailing Address:		
PORSCHE 2801 LLC.	PORSCHE 2801 LLC.		
7330 NW 36 AVENUE	7330 NW 36 AVENUE		
MIAMI FL 33147	MIAMI FL 33147		
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:			
DAVID AVAN			
Name			

7330 NW 36 AVENUE Florida street address (P.O. Box NOT acceptable) 33147 MIAMI FL State City Zip

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	DAVID AVAN 7330 NW 36 AVENUE MIAMI FL 33147
(Use attachment if necessary)	
If an effective date is listed, the date must be speci- he date of filing.)	filing: (OPTIONAL) fic and cannot be more than five business days prior to or 90 days after t the applicable statutory filing requirements, this date will not be listed as State's records.
REQUIRED SIGNATURE:	
This document is executed I am aware that any false in	per or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.
DAVID AVAN	
ገ	yped 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)