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.

(((H16000285533 3)))



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 : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone Fax Number

: (305)552-5973 : (305)675-5944

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

Fmail	Address:			

FLORIDA LIMITED LIABILITY CO. RRR 2 DEVELOPER LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Corporate Filing Menu

Help

Electronic Filing Menu

Nov 17 2016 05:57PM HP Fax

page 2

H16000285533

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CYMIPANY

ARTICLE I - Name: "he name of the Limited Liabil	ity Company is:			
	RRR 2 DEVE	SLOPER LLC		
(Must end	with the words 'Limited	l Liability Company, '1	LLC.," or "LLC.")	
ARTICLE II - Address; The mailing address and street o	ndstess of the principal o	office of the Limited Lie	ability Company is:	
Princip	al Office Address:		Malling Address:	
3875 NW 132 STREET			3875 NW 132 STREET	
3875 NW 132 STRI	BET .	3875 N	W 132 STREET	
OPA LOCKA, FL 3 RTICLE III - Registered Ag	3054 ent, Registered Office,	OPA LA	OCKA, FL 33054	
OPA LOCKA, FL 3 RETICLE III - Registered Ag The Limited Liability Company nother business entity with an	ent, Registered Office, y cannot serve as its own active Florida registration	& Registered Agent's Registered Agent. You	OCKA, FL 33054	
OPA LOCKA, FL 3 RETICLE III - Registered Ag The Limited Liability Company nother business entity with an	ent, Registered Office, y cannot serve as its own active Florida registration address of the registered	& Registered Agent's Registered Agent. You	OCKA, FL 33054	
OPA LOCKA, FL 3 RETICLE III - Registered Ag The Limited Liability Company nother business entity with an	ent, Registered Office, y cannot serve as its own active Florida registration address of the registered	& Registered Agent's Registered Agent. You n.)	OCKA, FL 33054	
OPA LOCKA, FL 3 RTICLE III - Registered Ag The Limited Liability Company nother business entity with an	ent, Registered Office, y cannot serve as its own active Florida registration address of the registered	& Registered Agent's Registered Agent. You m.) d agent are: RDO RODRIGUEZ Name	OCKA, FL 33054	
OPA LOCKA, FL 3 RETICLE III - Registered Ag The Limited Liability Company nother business entity with an	gent, Registered Office, y cannot serve as its own active Florida registratic address of the registerec RICAL	& Registered Agent's Registered Agent. You m.) d agent are: RDO RODRIGUEZ Name	OCKA, FL 33054 Signature: I must designate an individual or	
OPA LOCKA, FL 3	gent, Registered Office, y cannot serve as its own active Florida registratic address of the registerec RICAL	©PA LA & Registered Agent 'S Registered Agent You lagent are: RDO RODRIGUEZ Name	OCKA, FL 33054 Signature: I must designate an individual or	

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 agreeying for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Pego 1of2

90% NOV 18 PM 2: 15

page 3

H16000285533

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	DIGATE A DARROWS
AMBR	RICARDO RODRIGUEZ
	3875 NW 132 STREET
	OPA LOCKA, PL 33054
•••	
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
LEV: Effective date, if other than the date	of filing: .(OPTIONAL)
ffective date is listed, the date must be spe of Oliza.)	of filing: (OPTIONAL) selfic and cannot be more than five business days prior to or 90 days a seet the applicable statutory filing requirements, this date will not be lists
If the date inserted in this block does not m	of State's records.
If the date inserted in this block does not mountent's effective date on the Department of LE VI: Other provisions, if any.	
If the date inserted in this block does not me cument's effective date on the Department of LE VI; Other provisions, if any.	of State's records.
If the date inserted in this block does not uncert's effective date on the Department of LE VI: Other provisions, if any. REQUIRED SIGNATURE:	

Page 3 of 2

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Dasignation of Registered Agent

S 30.00 Certified Copy (Optional)
S 5.00 Certificate of Status (Optional)

RICARDO RODRIGUEZ

Typed or printed name of signee

H16000285533