## L17000037597

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400294004924

01/12/17--01017--021 \*\*160.00

D O'KEEFE FEB 2 1 2017 17 FEB 13 AN 8: 10

WM7-3656

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJEC	1 ARE HOLDINGS, LLC	
SUBJEC	Name of Limited Liability Company	
The encl	losed Articles of Organization and fee(s) are submitted for filing.	
Please re	eturn all correspondence concerning this matter to the following:	
	THOMAS RODRIGUEZ	
	Name of Person	
	1 ARE HOLDINGS, LLC	
	Firm/Company	
	1781 FAIRBANKS AVENUE	
	Address	
	WINTER PARK, FLORIDA 32789	
	City/State and Zip Code itomrod@gmail.com	
	E-mail address: (to be used for future annual report notification)	
For furthe	r information concerning this matter, please call:	
	Thomas Rodriguez 407 280-7080 at (	
	Name of Person Area Code Daytime Telephone Number	
Enclosed	d is a check for the following amount:	
\$125.00	Filing Fee \$\ \text{S130.00 Filing Fee & Certified Copy} \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	:d)
	Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  Street Address  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301	4

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabil	ity Company is:		
1 ARE HOLDINGS	, LLC		
(Must end	with the words "Limited	Liability Company, "I	L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and street	address of the principal of	ffice of the Limited Lia	bility Company is:
<u>Princi</u>	pal Office Address:		Mailing Address:
THOMAS RODRIC	GUEZ	1781 FA	AIRBANKS AVENUE WINTER PA
1781 W. F. WINTER P	AIRBANKS AI	CENUE WIN	TER PAKK, FL 32789
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	y cannot serve as its own	Registered Agent. You	Signature: a must designate an individual or
The name and the Florida street	address of the registered	agent are:	
	THOMAS RODRIGI	JEZ	
		Name	
	1781 FAIRBANKS A	VENUE	
	Florida street address	(P.O. Box NOT acce	ptable)
	WINTER PARK	FLORIDA	32789
	City	State	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..

Registered Agent's Signature (REQUIRED)

Page 1 of 2

(CONTINUED)

17 FEB 13 AM 8: 10

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	MICHELLE D. GOEMBEL
AWDK	826 DELFINO PLACE
	LAKE MARY, FLORIDA 32746
MGR	THOMAS RODRIGUEZ
William	1781 FAIRBANKS AVENUE
	WINTER PARK, FLORIDA 32789
ective date is listed, the date must of filing.)	the date of filing: DECEMBER 14, 2015 (OPTIONAL) st be specific and cannot be more than five business days prior to or 90 deserout meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than ective date is listed, the date must of filing.)	est be specific and cannot be more than five business days prior to or 90 d es not meet the applicable statutory filing requirements, this date will not b
E V: Effective date, if other than ective date is listed, the date must of filing.)  the date inserted in this block do	est be specific and cannot be more than five business days prior to or 90 d es not meet the applicable statutory filing requirements, this date will not b
E V: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block doment's effective date on the Department.	est be specific and cannot be more than five business days prior to or 90 d es not meet the applicable statutory filing requirements, this date will not b
E V: Effective date, if other than ective date is listed, the date must of filing.)  the date inserted in this block doment's effective date on the Department of the Departme	est be specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not burtment of State's records.
E V: Effective date, if other than ective date is listed, the date must of filing.)  The date inserted in this block doment's effective date on the Department. Other provisions, if any.  REQUIRED SIGNATURE:	est be specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not burtment of State's records.
E V: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block doment's effective date on the Department's Other provisions, if any.  REOUIRED SIGNATURE:  Signature This document is	est be specific and cannot be more than five business days prior to or 90 d es not meet the applicable statutory filing requirements, this date will not b
E V: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block doment's effective date on the Department's effective date on the Department's Council Signature  Signature This document is I am aware that a	es not meet the applicable statutory filing requirements, this date will not be artment of State's records.  of a member of an authorized representative of a member. It is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
E V: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block doment's effective date on the Department's effective date on the Departmen	of a member of an authorized representative of a member.  se executed in accordance with section 605.0203 (1) (b), Florida Statutes.  Interpretation of the section of the
E V: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block doment's effective date on the Department's effective date on the Departmen	es not meet the applicable statutory filing requirements, this date will not be artment of State's records.  of a member of an authorized representative of a member.  s executed in accordance with section 605.0203 (1) (b), Florida Statutes, any false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.
E V: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block doment's effective date on the Department's effective date on the Departmen	of a member of an authorized representative of a member.  s executed in accordance with section 605.0203 (1) (b), Florida Statutes, any false information submitted in a document to the Department of State (b) of State (c) of S
E V: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block doment's effective date on the Department's effective date on the Department's Constitutes a thir THOMA!	es not meet the applicable statutory filing requirements, this date will not be artment of State's records.  of a member of an authorized representative of a member. See executed in accordance with section 605.0203 (1) (b), Florida Statutes, any false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.  RODRIGUEZ