## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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## FLORIDA LIMITED LIABILITY CO. 342 189 TER Golden Shores, LLC

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name

The name of the Limited Liability Company is:

342 189 TER Golden Shores, LLC

ARTICLE II Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Malling Address:

2766 NW 62 St. Miami, FL 33147 2766 NW 62 St. 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:

Rene Gonzalez 2766 NW 62 St. Miami, FL 33147

Having been named as registered agent 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 (K

(CONTINUED)
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ARTICLE VI Manager(s) or Managing Mamber(s): The name and address of each Manager or Managing Member is as follows:
Title:  "MGRM" = Managing Member  "MGR" = Member  "AMBR" = Authorized Member
RG Business, Inc. – MGRM 2766 NW 62 St. Miami, FL 33147
Rene Gonzalez - MGR 2766 NW 62 St Miami, FL 33147
Raymond Gonzalez - MGR 2766 NW 62 St. Miami, FL 33147
ARTICLE VI: Effective date, if other than the date of filing: (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filling.)
REQUIRED SIGNATURE:
9/3
Signature of a member or an authorized representative of a member.  (This document is executed in accordance with section 605-0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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Typed or printed name of signee