Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H17000152623 3)))



H170001526233ABC

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 : FELDMAN & ASSOCIATES

Account Number : I20130000018 Phone : (786)288-5699

Fax Number : (866)856-1462

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

Email Address: paul@feldmanclosings.com

TUN-8 PH 3: 48

A JUN-8 PH 3: 48

ARSING OF COMPOSATION

FLORIDA LIMITED LIABILITY CO.

Marseille At Miami, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
Marseille At Miami, LLC	
(Must contain the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")
ADWOLF	
ARTICLE II - Address:	
The mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
19 Ridge Drive	19 Ridge Drive
East Great, NY 11021	East Great, NY 11021
ARTICLE III - Registered Agent, Registered Office, & Re	gistered Agent's Signature:
(The Limited Liability Company cannot serve as its own Regi-	
another business entity with an active Florida registration.)	•
The name and the Florida street address of the registered agen	if are:
PAUL FELDMAN, P.A.	
Nan	ne

Aventura FL 33180
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..

Florida street address (P.O. Box NOT acceptable)

2750 NE 185th Street, Suite 203

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

"MGR" = Manager MGR Alexandra Aboulafia 19 Ridge Drive East Great, NY 11021 MGR Arié Aboulafia 19 Ridge Drive East Great, NY 11021 Arié Aboulafia 19 Ridge Drive East Great, NY 11021 (Use attachment if necessary) EV: Effective date, ifother than the date of filing: (OPTIONAL) retive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing, or filing requirements, this date will no ment's effective date on the Department of State's records EVI: Other provisions, if any. 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 can aware that any filias information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Arié Aboulafia Typed or printed name of signee Filling Fees: \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)	Title:		Name and Address:
Alexandra Aboulafia 19 Ridge Drive East Great, NY 11021 MGR Arić Aboulafia 19 Ridge Drive East Great, NY 11021 [Use attachment if necessary] EV: Effective date, if other than the date of filing: [COPTIONAL.] Serve date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.] the date inserted in this block does not meet the applicable statutory filing requirements, this date will no ment's effective date on the Department of State's records EVI: Other provisions, if any. REQUIRED SIGNATURE: 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. Arié Aboulafia Typed or printed name of signee Filling Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent			
(Use attachment if necessary) Ev: Effective date, if other than the date of filing: (Use attachment if necessary) Ev: Effective date, if other than the date of filing: (OPTIONAL) retive date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will no ment's effective date on the Department of State's records EVI: Other provisions, if any. REOURED SIGNATURE: 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. Arié Aboulafia Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent		ager	Atmondes Abouteen
East Great, NY 11021 Arié Aboulafia 19 Ridge Drive East Great, NY 11021 (Use attachment if necessary) EV: Effective date, if other than the date of filing: (OPTIONAL) tetive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing) the date inserted in this block does not meet the applicable statutory filing requirements, this date will no ment's effective date on the Department of State's records EVI: Other provisions, if any. REQUIRED SIGNATURE: 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. Arié Aboulafia Typed or printed name of signee Filling Fees: \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent	MGK		
Arić Aboulafia 19 Ridge Drive East Great, NY 11021 (Use attachment if necessary) EV: Effective date, if other than the date of filing: (OPTIONAL) retive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will no ment's effective date on the Department of State's records EVI: Other provisions, if any. REQUIRED SIGNATURE: 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. Arić Aboulafia Typed or printed name of signee Elling Fess; \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent			
(Use attachment if necessary) EV: Effective date, if other than the date of filing:			East Great, NY 11021
(Use attachment if necessary) EV: Effective date, if other than the date of filing:	MGR		Arić Aboulafia
(Use attachment if necessary) EV: Effective date, if other than the date of filing:			
(Use attachment if necessary) EV: Effective date, if other than the date of filing:			
EV: Effective date, if other than the date of filing:			
EV: Effective date, if other than the date of filing:			
EV: Effective date, if other than the date of filing:			
EV: Effective date, if other than the date of filing:			-
EV: Effective date, if other than the date of filing:			
EV: Effective date, if other than the date of filing:			
EV: Effective date, if other than the date of filing:			
EV: Effective date, if other than the date of filing:			
EV: Effective date, if other than the date of filing:	a	. 10	
retive date is listed, the date must be specific and cannot be more than five business days prior to or 96 of filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records EVI: Other provisions, if any. 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. Arié Aboulafia Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent			
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. Arié Aboulafia Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.)	•	• •
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. Arié Aboulafia Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.) the date inserte	d in this block does not meet	the applicable statutory filing requirements, this date will not
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. Arié Aboulafia Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.) the date inserte ment's effective	d in this block does not meet date on the Department of St	the applicable statutory filing requirements, this date will not
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. Arié Aboulafia Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.) the date inserte ment's effective	d in this block does not meet date on the Department of St	the applicable statutory filing requirements, this date will not
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. Arié Aboulafia Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.) the date insertement's effective	d in this block does not meet date on the Department of So wisions, if any.	the applicable statutory filing requirements, this date will not tate's records
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. Arié Aboulafia Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.) the date insertement's effective	d in this block does not meet a date on the Department of Stavisions, if any. IGNATURE:	the applicable statutory filing requirements, this date will not tate's records
constitutes a third degree felony as provided for in s.817.155, F.S. Arié Aboulafia Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.) the date insertement's effective	d in this block does not meet a date on the Department of Solvisions, if any. IGNATURE:	the applicable statutory filing requirements, this date will not tate's records The applicable statutory filing requirements, this date will not tate's records
Arié Aboulafia Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.) the date insertement's effective	d in this block does not meet a date on the Department of Solvisions, if any. IGNATURE: Signature of a memba This document is executed in	the applicable statutory filing requirements, this date will not tate's records The applicable statutory filing requirements, this date will not tate's records The applicable statutory filing requirements, this date will not tate a record and a statutory filing requirements, this date will not tate a record and a statutory filing requirements, this date will not tate a record and a statutory filing requirements, this date will not tate a record a
Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.) the date insertement's effective	d in this block does not meet a date on the Department of Solvisions, if any. IGNATURE: Signature of a memba This document is executed in an aware that any false infe	the applicable statutory filing requirements, this date will not tate's records er or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. ormation submitted in a document to the Department of State
Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.) the date inserte ment's effective EVI: Other pro	d in this block does not meet a date on the Department of Solvisions, if any. IGNATURE: Signature of a memba This document is executed in an aware that any false infe	the applicable statutory filing requirements, this date will not tate's records er or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. ormation submitted in a document to the Department of State
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	of filing.) the date inserte ment's effective EVI: Other pro	d in this block does not meet a date on the Department of Stavisions, if any. IGNATURE: Signature of a member This document is executed in I am aware that any false infectorstitutes a third degree felo. Arié Aboulafia	the applicable statutory filing requirements, this date will not tate's records er or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. ormation submitted in a document to the Department of State only as provided for in s.817.155, F.S.
	of filing.) the date insertement's effective	d in this block does not meet a date on the Department of Stavisions, if any. IGNATURE: Signature of a member This document is executed in I am aware that any false infectorstitutes a third degree felo. Arié Aboulafia	the applicable statutory filing requirements, this date will not tate's records er or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. ormation submitted in a document to the Department of State only as provided for in s.817.155, F.S.
\$ 30.00 Certified Copy (Optional)	of filing.) the date insertentent's effective	d in this block does not meet a date on the Department of Stavisions, if any. IGNATURE: Signature of a member This document is executed in I am aware that any false infectorstitutes a third degree felo. Arié Aboulafia	the applicable statutory filing requirements, this date will not tate's records er or an authorized representative of a member. m accordance with section 605.0203 (1) (b), Florida Statutes. permation submitted in a document to the Department of State only as provided for in s.817.155, F.S.
\$ 5.00 Certificate of Status (Optional)	of filing.) the date insertement's effective EVI: Other pro REQUIRED S	d in this block does not meet a date on the Department of So avisions, if any. IGNATURE: Signature of a member This document is executed in a naware that any false infectorstitutes a third degree feltomatic Arié Aboulafia Type Fee for Articles of Organians	the applicable statutory filing requirements, this date will not tate's records er or an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida Statutes. ormation submitted in a document to the Department of State only as provided for in s.817.155, F.S. gped or printed name of signee Filing Fees: