

Florida Department of State
Division of Corporations
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(((H17000160434 3)))



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To:
Division of Corporations
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From:
Account Name : SALOMON B. ESQUENAZI, P.A.
Account Number : I20130000020
Phone : (954) 989-4995
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DIVISION OF CORPORATIONS
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**FLORIDA LIMITED LIABILITY CO.
Finchel Madison Court LLC**

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 JUN 16 AM 8:59

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I. Name

The name of the Limited Liability Company is:

FINCHEL MADISON COURT LLC

ARTICLE II. – Address

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

3370 NE 190 Street,
Unit 903
Aventura, Florida 33180

**ARTICLE III. – Registered Agent, Registered Office,
& Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

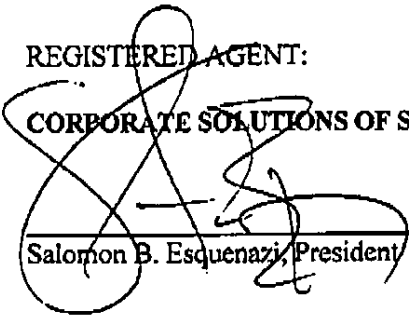
Corporate Solutions of South Florida, Inc
4651 Sheridan Street, Suite 355
Hollywood, FL 33021

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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, we hereby accept the appointment as registered agent and agree to act in this capacity. We further agree to comply with the provisions of all statutes relating to the proper and complete performance of our duties, and we are familiar with and accept the obligations of our position as registered agent as provided for in Chapter 605, Florida Statutes.

REGISTERED AGENT:

CORPORATE SOLUTIONS OF SOUTH FLORIDA, INC.


Salomon B. Esquenazi, President

Audit No: H17000160434 3
This instrument was prepared by:
Salomon B. Esquenazi, Esq.
Salomon B. Esquenazi, P.A.
4651 Sheridan Street, Suite 355
Hollywood, FL 33021
(954) 989-4995

Audit No. H17000160434 3

ARTICLE IV. – Management:

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The name and address of the manager who is to serve as initial manager is:

Mordje Fincheltub
3370 NE 190 Street, Unit 903
Aventura, Florida 33180



Signature of a member or authorized representative of a member.

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.

4841-8412-1930, v. 1

Audit No.: H17000160434 3
This instrument was prepared by:
Salomón B. Esquenazi, Esq.
Salomon B. Esquenazi, P.A.
4651 Sheridan Street, Suite 355
Hollywood, FL 33021
(954) 989-4995