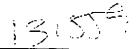
## Florida Department of State

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.

(((H17000277356 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 : CORP USA Account Number: 072450003255 : (305)634-3694

Fax Number : (305)633-9696

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

Email A	ladre	δ	8	:
---------	-------	---	---	---

## FLORIDA LIMITED LIABILITY CO. 11041 HOLDINGS LLC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liabili			
water of the Figurest Diffett	ty Company is:		
11041 Holdings LLA	C., a Florida Limited Li	ability Compan	y
(Must cont	ain the words "Limited	Liability Comp	ny, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street a	ddress of the principal (	office of the Lim	lited Liebility Company is:
	al Office Address:		Mailing Address:
4135 SW 103 Avenu			4135 SW 103 Avenue
Miami, Florida 3316	5.5		Miami, Florida 33165
another business entity with an a		i ageni are:	
		s (P.O. Box <u>NO</u>	Tacceptable)
	Miami	F1.	33135
			33135 Zip

(CONTINUED)

HILED

17 OCT 20 MM 9: 54

PACCATIAGY OF SIANS

Mignal, Florida 33165    Wignal   Mignal, Florida 33165	Tirle: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
(Use attachment if necessary)  E. V.: Effective date, if other than the date of filing:  certive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records.  E. VI: 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 deper fellow as provided for in s.817.155, F.S.  Typed or printed name of signee	MUR	Michel Leon
(Use attachment if necessary)  E. V.: Effective date, if other than the date of filing:  certive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records.  E. VI: 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 deper fellow as provided for in s.817.155, F.S.  Typed or printed name of signee		4135 SW 103 Avenue
(Use attachment if necessary)  E. V.: Effective date, if other than the date of filing:  cretive date is listed, the date must be specific and cannot be more than five business days prior to or 98 days aft of filing.)  the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records.  E. VI: 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 deper felony as provided for in s.817.155, F.S.  Typed or printed name of signee		Miami, Florida 33165
EV: Effective date, if other than the date of filing:  certive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft of filing.)  the date inserted in this block does not meet the applicable statusory filing requirements, this date will not be listed 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, P.S.  Typed or printed name of signee		
EV: Effective date, if other than the date of filing:		
EV: Effective date, if other than the date of filing:  cetive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft filing.)  the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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, P.S.  Typed or printed name of signee		
EV: Effective date, if other than the date of filing:  cerive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft filing.)  the date inserted in this block does not meet the applicable statusory filing requirements, this date will not be listed 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, P.S.  Typed or printed name of signee		
EV: Effective date, if other than the date of filing:  certive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft of filing.)  the date inserted in this block does not meet the applicable statusory filing requirements, this date will not be listed 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, P.S.  Typed or printed name of signee		<del></del>
EV: Effective date, if other than the date of filing:  cetive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft filing.)  the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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, P.S.  Typed or printed name of signee		
EV: Effective date, if other than the date of filing:  cetive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft filing.)  the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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, P.S.  Typed or printed name of signee		
EV: Effective date, if other than the date of filing:  cerive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft filing.)  the date inserted in this block does not meet the applicable statusory filing requirements, this date will not be listed 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, P.S.  Typed or printed name of signee		
EV: Effective date, if other than the date of filing:		<b>→</b>
EV: Effective date, if other than the date of filing:  certive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft of filing.)  the date inserted in this block does not meet the applicable statusory filing requirements, this date will not be listed 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, P.S.  Typed or printed name of signee		<i> </i>
EV: Effective date, if other than the date of filing:  certive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft of filing.)  the date inserted in this block does not meet the applicable statusory filing requirements, this date will not be listed 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, P.S.  Typed or printed name of signee		——————————————————————————————————————
EV: Effective date, if other than the date of filing:  cetive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft filing.)  the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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, P.S.  Typed or printed name of signee	441	
EV: Effective date, if other than the date of filing:	(Use Billaciament if necessary)	r-cn
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.  Peter R. Authoritation of Signee	of filing.)	filing: (OPTIONAL) SR
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, P.S.  Typed or printed name of signee	of filing.) The date inserted in this block does not mee	ic and cannot be more than five business days prior to or 90 days
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, P.S.  Typed or printed name of signee	of filing.) the date inserted in this block does not meet nent's effective date on the Department of S	ic and cannot be more than five business days prior to or 90 days
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, P.S.  Typed or printed name of signee	of filing.) the date inserted in this block does not meet ment's effective date on the Department of SE VI: Other provisions, if any.	ic and cannot be more than five business days prior to or 90 days
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, P.S.  Typed or printed name of signee	of filing.) the date inserted in this block does not meet nent's effective date on the Department of SEVI: Other provisions, if any.  REQUIRED SIGNATURE:	The end cannot be more than five business days prior to or 90 days to the applicable statutory filing requirements, this date will not be listiate's records.
constitutes a third degree felony as provided for in s.817.155, P.S.  Teter R. Alexander  Typed or printed name of signee	I fling.) the date inserted in this block does not meet ment's effective date on the Department of SEVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a memb	The end cannot be more than five business days prior to or 90 days to the applicable statutory filing requirements, this date will not be listiate's records.
Typed or printed name of signee	the date inserted in this block does not meet nent's effective date on the Department of SE VI: Other provisions, if any.  Signature of a memb.  This document is executed in this block does not meet nent's effective date on the Department of SE VI: Other provisions, if any.	it end cannot be more than five business days prior to or 90 days  t the applicable statutory filing requirements, this date will not be lisseate's records.  Addition a good-  er or an authorized representative of a member.
Typed or printed name of signee	the date inserted in this block does not meet ment's effective date on the Department of SE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a memb This document is executed it am aware that any false info	it and cannot be more than five business days prior to or 90 days to the applicable statutory filing requirements, this date will not be listing a scart as a nuthorized representative of a member. In secondance with section 605.0203 (1) (b), Florida Statutes.
Killing Heads	the date inserted in this block does not meet ment's effective date on the Department of SE VI: Other provisions, if any.  Signature of a memb This document is executed it am aware that any false inficonstitutes a third degree felore.	it and cannot be more than five business days prior to or 90 days to the applicable statutory filing requirements, this date will not be listing a scart as a nuthorized representative of a member. In secondance with section 605.0203 (1) (b), Florida Statutes.
Milling Hanne	the date inserted in this block does not meet ment's effective date on the Department of SEVI: Other provisions, if any.  Signature of a memb This document is executed it am aware that any false inficonstitutes a third degree felore.	it and cannot be more than five business days prior to or 90 days to the applicable statutory filing requirements, this date will not be listing a scart as a nuthorized representative of a member. In secondance with section 605.0203 (1) (b), Florida Statutes.
Filling Peess	the date inserted in this block does not meet ment's effective date on the Department of SEVI: Other provisions, if any.  Signature of a memboration of the department of the date on the Department of SEVI: Other provisions, if any.	er or an authorized representative of a member. In accordance with section 605,0203 (1) (b), Florida Statutes. Formation submitted in a document to the Department of State only as provided for in s.817.155, P.S.
	the date inserted in this block does not meet ment's effective date on the Department of SEVI: Other provisions, if any.  Signature of a memboration of the department of the date on the Department of SEVI: Other provisions, if any.	er or an authorized representative of a member. In accordance with section 605,0203 (1) (b), Florida Statutes. Formation submitted in a document to the Department of State only as provided for in s.817.155, P.S.

₽AGE 03/03