Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

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Email Address:

FLORIDA LIMITED LIABILITY CO. RK 1096-1100 NORMANDY, LLC

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Electronic Filing Menu

Corporate Filing Menu

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January 8, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS CORPORATE

SUBJECT: RK 1096-1100 NORMANDY, LLC

REF: W18000001466

We have received your document for RK 1096-1100 NORMANDY, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Carlos E Rico Regulatory Specialist II FAX Aud. #: H18000006651 Letter Number: 918A00000373

H18000006651

ARTICLES OF ORGANIZATION FOR FIA	HEDA LIMITED LIABILITY COMPANY
ARTICLE I - Names The name of the Limited Liability Company is:	•
RK 10915 - 1100 (Next and with the words "Limited Listellis	Nomandy, LLC.
ARTICLE II - Address: The mailing address and street address of the pri	neipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address
17100 Collin's Avenue, Ste 225 Summissier Beach FL 23160	17100 Collins Arenne, Ste. 225 Some Islee Bouch, FL 33160
ARTICLE III - Registered Agent, Registered (The Limited Liability Company camet serve as its own Registe buttons entity with an active Florida registration.)	
The name and the Florida street address of the re	agistered agent ere:
Mitchell Cut	7
2461111	rus (F.O. Box NOT mosptable)
Stormy Isles Boach City, Black, a	FL 33160
liability company at the place designates in a regimered agent and agree to act in this capacity	nccept service of process for the above stated limited his cartificate, I hereby accept the appointment as of I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and intered agent as provided for in Chapter 605 F.S.

(CONTINUED)
Page 1 of 2

Mitchell Cuttor Registered Agent's Signature (REQUIRED)

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H18000006651

ARTICLE IV- Manager (s) or Managing Mamber (s):
The name and address of each Manager or Managing Member is as follows:

Tides	Name and Address.
"MOR" = Menoping Member	e e e e e e e e e e e e e e e e e e e
MGRM	Ramon Kata 16400 Collins Amenus APHHO Swamp 1300 Boach & 33160
MGR_	Daniel Katz 248 Park Drive Bal Harbour, Ft. 33154
	and the second s
(Use attackment if neckssary)	
	dute of filing: (OPTICNAL) specific and cannot be more than five business days p
REQUIRED STONATURE:	
b	to
Signature of a momber	r or an audiorised representative of a member.
	tion 605 Figrids Statutes, the execution
<u> </u>	• • •
Q_{a}	and or printed mane of signed

Part Peces

\$139.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optionsi)
\$ 3.00 Certificate of Status (Optional)

yage 2 of 2