Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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FLORIDA LIMITED LIABILITY CO. BARREIRO RANCH, LLC

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January 9, 2018

FLORIDA DEPARTMENT OF STATE Division of Corporations

EXPRESS

SUBJECT: BARREIRO RANCH, LLC

REF: W18000002001

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Terri J Schroeder Regulatory Specialist III New Filings FAX Aud. #: H18000008541 Letter Number: 018A00000497

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Barreiro Ranch, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "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:
158335W795t 158335W795t Warni FC 33193 HiamiFL 33193
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:
Ava A Conzalez
7688 SW 137 Ave Florida street address (P.O. Box NOT acceptable)
Mami EL 33175
City 2ip
Having been named as registered agent and to accept service of process for the above stated limited liability company of 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 (REQUIRED)
(CONTINUED)

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ARTICLE IV- The name and address of each person	authorized to manage and control the Limited Liability Company:
Title: "AMBR" = Authorized Member "MGR" = Manager LGYNG G CY	Jorge Luis Adrian
Member	Obolis Advisor 15833 Swing 54
Member Va. her	Jorge Antonia Adrian
Member	layonis Adrian 15833 Sw795t miami FL 33193
(Use attachment if necessary)	
CLE V: Effective date, if other than the date leffective date is listed, the date wrust be a to of filling.) CLE VI: Other provisions, if any.	te of filing:; (OPTIONAL) reselfic and cannot be more than five business days prior to or 90
REQUIRED SIGNATURE:	Vestimi
(In secondance with section complitutes an affirmation 1 am sware that any fairs	Typed or printed name of signes Typed or printed name of signes Typed or printed name of signes

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