

L18000034716

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.

((H18000047249 3)))



H180000472493ABC2

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
Phone : (305)634-3694
Fax Number : (305)633-9696

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

Email Address: _____

RECEIVED
FLORIDA DEPARTMENT OF STATE
FEB 8 2018

18 FEB -8 AM 10:09

FILED

**FLORIDA LIMITED LIABILITY CO.
T7 INVESTMENT, LLC**

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

Electronic Filing Menu

Corporate Filing Menu

Help

2018 FEB -8 PM 11:22

FILED

18 FEB -8 AM 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This Instrument Prepared By:

JOHN P. MAAS, ESQUIRE
44 NE 16th Street
Homestead, Florida 33030
305-247-7132
Florida Bar No. 435910

ARTICLES OF ORGANIZATION

OF

T7 INVESTMENT, LLC

ARTICLE I:

The name of this limited liability company shall be: T7 INVESTMENT, LLC, a Florida limited liability company.

ARTICLE II:

The mailing address and street address of the principal office of the limited liability company shall be as follows:

MAILING ADDRESS:
P.O. Box 344218
Florida City, FL 33034

PHYSICAL ADDRESS:
300 North Krome Avenue, Bldg. 2
Florida City, FL 33034

ARTICLE III:

The name and the Florida street address of the registered agent for T7 INVESTMENT, LLC, are as follows:

CHARLES PORTER
300 North Krome Avenue, Bldg. 2
Florida City, FL 33034

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.


CHARLES PORTER

ARTICLE IV:

The name and address of each person authorized to manage and control the Limited Liability Company:

CHARLES PORTER (MGR)
P.O. Box 344218
Florida City, FL 33034

DATED this 6th day of February, 2018.


CHARLES PORTER, MANAGER

MA2018\CORP & LLC WORK\7048-18 T7 INVESTMENT, LLC\ARTICLES OF ORGANIZATION LLC-ver-02-06-18
csb.doc

FILED
18 FEB -8 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA