

6/14/2018

Division of Corporations

L18000146108

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.

(((H18000178577 3)))



H180001785773ABCB

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

18 JUN 14 AM 11:19
RECEIVED

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : 120180000011
Phone : (844)386-0178
Fax Number : (214)317-4754

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
SHALVIE INVESTMENTS, LLC**

RECEIVED
2018 JUN 14 PM 2:01
CORPORATIONS
COMMERCIAL
INFORMATION SERVICES

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

T COLLINS
JUN 15 2018

((H18000178577 3))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SHALVIE INVESTMENTS, LLC

(Must contain 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:

Mailing Address:

340 W. Flagler Street
Suite 209
Miami, FL 33130

340 W. Flagler Street
Suite 209
Miami, FL 33130

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.)

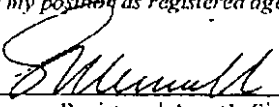
The name and the Florida street address of the registered agent are:

Stewart M. Mirmelli
Name

340 W. Flagler Street, Suite 209
Florida street address (P.O. Box **NOT** acceptable)

Miami FL 33130
City State Zip

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
18 JUN 14 AM 11:19
CLERK OF STATE
TALLAHASSEE, FLORIDA

((H18000178577 3))

((H18000178577 3))

ARTICLE IV-

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

<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member	
"MGR" = Manager	
<u>AMBR</u>	<u>Stewart M. Mirmelli</u>
	<u>340 W. Flagler Street, Suite 209</u>
	<u>Miami, FL 33130</u>

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JUNE 11, 2018 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE 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 Statute.
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.

Stewart M. Mirmelli
Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

DEPARTMENT OF STATE
 REGISTRATION SERVICES
 18 JUN 14 AM 11:19
 FILED

((H18000178577 3))