

L18000172722

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (950)617-6381

From: Account Name : HARVARD BUSINESS SERVICES, INC.
Account Number : I20090000045
Phone : (302)645-7400
Fax Number : (302)645-1280

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18 JUL 17 AM 10:33
ADAMS SERVICE CORP

2018 JUL 17 PH 2:02
DIVISION OF CORPORATIONS
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: MRachetti@pvc.com.uy

FLORIDA LIMITED LIABILITY CO.
RAF Real Estate LLC

new name for filing will be
RAF Property LLC

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

T COLLINS
JUL 18 2018



July 16, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

HARVARD BUSINESS SERVICES, INC

SUBJECT: RAF REAL ESTATE LLC
REF: W18000064672

We have received your document for RAF REAL ESTATE LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L16000160045.

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.

Catherine M Wood
Regulatory Specialist II

FAX Aud. #: H18000203882
Letter Number: 818A00014515

P.O BOX 6327 - Tallahassee, Florida 32314

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DIVISION OF CORPORATIONS
STATE OF FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RAF Property 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:

Paseo Estate, Road Town, Tortola
British Virgin Islands

Paseo Estate, Road Town, Tortola
British Virgin Islands

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:

Registered Agents Inc.
Name
3030 N. Rocky Point Dr., STE 150A
Florida street address (P.O. Box NOT acceptable)
Tampa FL 33607
City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company in 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..

Bill Hauer
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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18 JUL 17 AM 10:39
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TAMPA, FLORIDA

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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>MGR</u>	<u>Amandio SOARES FERNANDES JUNIOR</u>
	<u>Rua Agripa de Vasconcelos N° 70</u>
	<u>Belo Horizonte, Minas Gerais, Brasil</u>

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:

Amandio Soares Fernandes Junior

 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.

Amandio SOARES FERNANDES JUNIOR

 Typed or printed name of signer

- 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)

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 18 JUL 17 AM 10:39
 DEPARTMENT OF STATE
 ALBANY, NEW YORK

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