

9/4/2018

Division of Corporations

# L18000210490

Florida Department of State  
Division of Corporations  
Economic Planning & Development

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Fax Number : (850)617-6381

From: Account Name : LEGALINC CORPORATE SERVICES INC.  
Account Number : I20180000011  
Phone : (844)386-0178  
Fax Number : (214)317-4754

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### FLORIDA LIMITED LIABILITY CO. Miami Development Fund, LLC

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Certified Copy	1
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Estimated Charge	\$155.00

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September 5, 2018

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LEGALINC CORPORATE SERVICES INC.

SUBJECT: MIAMI DEVELOPMENT FUND, LLC  
REF: W18000079450

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

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

Carlos E Rico  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H18000258076  
Letter Number: 518A00018312

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: Miami Development Fund, LLC

**ARTICLE II - Address:**


The mailing address and street address of the principal office of the Limited Liability Company is: c/o V. Chen, 5955 Ponce de Leon Blvd., Coral Gables, FL 33146

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**


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

Vincent Chen  
 \_\_\_\_\_  
 Name  
 5955 Ponce de Leon Blvd.  
 \_\_\_\_\_  
 Florida street address (P.O. Box **NOT** acceptable)  
 Coral Gables, FL 33146 FL  
 \_\_\_\_\_  
 City, State, and 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 608, F.S.*

  
 \_\_\_\_\_  
 Registered Agent's Signature

(An additional article must be added if an effective date is requested)

  
 \_\_\_\_\_  
 Signature of a member or an authorized representative of a member.  
 (In accordance with section 605.0203(1)(b) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Vincent Chen  
 \_\_\_\_\_  
 Typed or printed name of signee

- Filing Fees:**  
 \$100.00 Filing Fee for Articles of Organization  
 \$ 25.00 Designation of Registered Agent  
 \$ 30.00 Certified Copy (Optional)  
 \$ 5.00 Certificate of Status (Optional)

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