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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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annual report mailings. Enter only one email address please.**

Email Address:_____

FLORIDA LIMITED LIABILITY CO. TAJ INVESTMENT LLC

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\$130.00

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FO

ARTICLE I - Name:

ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

The name of the Lin	nited Liability Company is:				
TAJ INU	ESTMENT LLC				
ARTICLE II - Address The mailing address Company is:	ess: s and street address of the prir	ncipal office (of the Limited Lia	ability	
805 CREM	IONA AVENUE				
CORAL GA	OLES FL 331	46			
The name and the F	istered Agent, Registered Office lorida street address of the re- own Registered Agent. You must designate tration.)	gistered ager		Jabüüry ↓Ç ↓↓[M]	2011
ANA ELIZ	ABETH LANDA		···	ACF.	2018 SEP
805	Cremona	Aver	nue	AE.	-
coral	Gables	FL	33146	SSE	3 (
ARTICLE IV The name and title Liability Company:	of each person authorized to r (MGR or AMBR)	nanage and (control the Limite	STATE E.FL ed	9. <u>2</u>
Ana	Elizabeth	Lan	da		
	(AMBR)				

Required Signatures:

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 berein are true. 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.

ANA ELIZAGETH LANDA

Typed or printed name of signee

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)

2018 SEP -6 AM 9: 51
SECRETARY OF STATE