Florida Department of State

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(((H18000284438 3)))



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From:

Account Name : SALOMON B. ESQUENAZI, P.A.

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Email Address:

corporate@esquenazi-law.com

FLORIDA LIMITED LIABILITY CO.

Central Hallandale LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

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Electronic Filing Menu

Corporate Filing Menu

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Audit No.: H180002844383

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. Name

The name of the Limited Liability Company is:

Central Hallandale LLC

ARTICLE II. - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

2000 Island Bivd. Unit 1507 Miami, FL 33160

ARTICLE III. – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Corporate Solutions of South Florida, Inc 4651 Sheridan Street, Suite 355 Hollywood, FL 33021

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, we hereby accept the appointment as registered agent and agree to act in this capacity. We further agree to comply with the provisions of all statutes relating to the proper and complete performance of our duties, and we are familiar with and accept the obligations of our position as registered agent as provided for in Chapter 605, Florida Statutes.

SECRETARY OF SIALI

REGISTERED AGENT:

CORPORATE SOLUTIONS OF SOUTH FLORIDA, INC.

Salomon B. Esquentzi, President

Audit No; H18000284438 3 This instrument was prepared by: Salomon B. Esquenazi, P.A. 465+ Sheridan Street, Suite 355 Hollywood, FL 33021 (954) 989-4995 Audit No. H18000284438 3

ARTICLE IV. - Management:

1

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The names and addresses of the managers who are to serve as initial managers are:

Cababie Dichi, Jacobo

2000 Island Blvd, Unit 1507 Miami, FL 33160

Cababic Dichi, Elias

2000 Island Blvd, Unit 1507 Miami, FL 33160

Cababie Zaga, Moises

17875 Collins Ave., Unit 3901

Sunny Isles, FL 33160

Signature of a member or authorized representative of a member 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.

4849-5766-5653, v. 1

Audit No.: H180002844383 This instrument was prepared by: Salomon B. Esquenazi, P.A. 4651 Sheridan Street, Suite 355 Hollywood, FL 33021 (954) 989-4995