

12/5/2018

# L18000279289

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

From: Account Name : R&P ACCOUNTING AND TAXES INC  
Account Number : I20170000090  
Phone : (305)358-1310  
Fax Number : (305)503-6701

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

Email Address: arc08723@gmail.com

FLORIDA LIMITED LIABILITY CO.  
BEAUTIFUL WYNWOOD LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 0        |
| Page Count            | 05       |
| Estimated Charge      | \$125.00 |

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TALLAHASSEE, FLORIDA

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

**ARTICLE I**

*The name of the Limited Liability Company and Effective day is:*

**BEAUTIFUL WYNWOOD LLC**

*(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation  
"LLC," or "L.C.,")*

**ARTICLE II**

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

**Principal Office Address**  
194-96 NW 24<sup>th</sup> ST  
MIAMI, FL 33127

**Mailing Address**  
151 NW 24<sup>th</sup> ST # 107  
MIAMI, FL 33127

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### **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:*

**R&P ACCOUNTING & TAXES, INC**

*Name*

**200 SE 1<sup>ST</sup> STREET, SUITE #604**

*Florida Street address (P.O. Box NOT acceptable)*

**MIAMI, FL 33131**

*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 605, F.S*

X.....

**Registered Agent's Signature (REQUIRED)**

#### ARTICLE IV

**MGR=Manager(s) or AMBR= AUTHORIZED Member(s):**

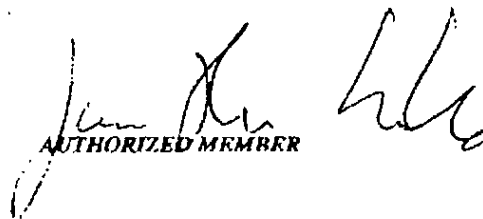
**The name and address of each Person authorized to manage and control the Limited Liability Company:**

**Title:**

**ANDRES SAN MARTIN**  
151 NW 24<sup>th</sup> ST # 107  
MIAMI, FL 33127

  
**AUTHORIZED MEMBER**

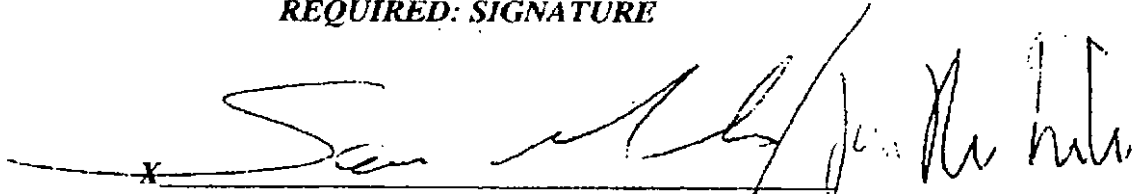
**JONATHAN TABORA**  
151 NW 24<sup>th</sup> ST # 107  
MIAMI, FL 33127

  
**AUTHORIZED MEMBER**

#### 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.)**

**REQUIRED: SIGNATURE**

  
Signature of a member or an authorized representative of a member.

**JONATHAN TABORDA / ANDRES SAN MARTIN**

*(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.)*

**ARTICLE VI**

*The Florida Limited Liability Company will engage in any activity or business permitted under the laws of the State of Florida and the United States of America.*

*The main objective of the company is: RESTAURANT*

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