

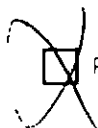
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(Requestor's Name)

(Address)

(Address)

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COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Florida Alliance, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ronald G. Meyer, Esquire

Name of Person

Meyer, Brooks, Blohm and Hearn, P.A.

Firm/Company

131 North Gadsden Street

Address

Tallahassee, Florida 32301

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lynn Thomas 850 878-5212

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|--|---|

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION

FOR

FLORIDA ALLIANCE, LLC

The undersigned subscribes to these Articles of Organization for the purpose of forming a Limited Liability Company, which shall become effective upon filing of these Articles with the Secretary of State.

ARTICLE I

The name of the Limited Liability Company is "Florida Alliance, LLC."

ARTICLE II

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

542 Northeast 72nd Street
Miami, Florida 33138

ARTICLE III

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

Raymond Paultre
542 Northeast 72nd Street
Miami, Florida 33138

ARTICLE IV

The names and addresses of each person authorized to manage and control the Limited Liability Company are as follows:

Title:

Name and Address:

MGR/AMBR – Manager/Authorized Member

Raymond Paultre
542 Northeast 72nd Street
Miami, Florida 33138

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CLERK OF DISTRICT COURT
JANUARY 19, 2019

AMBR – Authorized Member

Barbara Stiefel
700 Coral Way #3
Coral Gables, Florida 33134

AMBR – Authorized Member

Jean-Philippe Austin
504 Main Lodge Drive
Miami, Florida 33133

ARTICLE V

The purpose for which this Limited Liability Company is formed is to conduct any lawful business permitted under the laws of the United States or of the State of Florida.

IN WITNESS WHEREOF, in accordance with Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.


RAYMOND PAULTRE

VERIFICATION

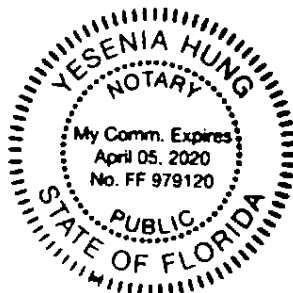
STATE OF FLORIDA)


COUNTY OF MIAMI-DADE)

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NOTARY PUBLIC
STATE OF FLORIDA

The foregoing instrument was acknowledged before me this 30th day of January, 2019, by Raymond Paultre, who ☐ is personally known to me **OR** ☒ provided a valid driver's license as identification.

WITNESS my hand and seal in the County and State named above on this 30th day of January, 2019.




NOTARY PUBLIC

Notary Public: Yesenia Hung
Printed Name

My Commission Expires: 04-05-2020

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at 542 Northeast 72nd Street, Miami, Florida 33138, 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 Florida Statutes.


RAYMOND PAULTRE
Registered Agent

Date: January 30th, 2019

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JANUARY 30, 2019
MIAMI, FLORIDA