

Division of Corporations

Page 1 of 2

**C19000048556**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H19000064252 3)))



H190000642523ABC\$

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

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

From: Account Name : BELOFF LAW, P.A.  
Account Number : I20080000060  
Phone : (305)673-1101  
Fax Number : (305)673-5505

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

Email Address: JVB@BELOFFLAW.COM

**FLORIDA LIMITED LIABILITY CO.  
1101 E 33 HOLDINGS, LLC**

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

2019 FEB 25 AM 9:36  
SECRETARY OF STATE  
TALLAHASSEE, FL

**FILED**

2019 FEB 25 16:40

(((H19000064252 3)))

**COVER LETTER**  
(RE-0023-57)

**TO: REGISTRATION SECTION  
DIVISION OF CORPORATION**

**SUBJECT: NEW FILING**

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

**Please return all correspondence concerning this matter to the following:**

**Jonathan D. Beloff, Esq.  
1691 Michigan Avenue  
Suite 250  
Miami Beach, Florida 33139  
Telephone: 305-673-1101**

**Email Address: JDB@BELOFFLAW.COM**

**\$160.00 Filing Fee  
Certificate Status & Certified Copy**

(((H19000064252 3)))

(((H19000064252 3)))

**ARTICLES OF ORGANIZATION  
FOR  
1101 E 33 HOLDINGS, LLC  
a Florida limited liability company**

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

**ARTICLE I- NAME:**

The name of the limited liability company is: **1101 E 33 HOLDINGS, LLC**

**ARTICLE II- ADDRESS:**

The address of its principal place of business, as well as the mailing address for this limited liability company is: **334 ATLANTIC ISLE, SUNNY ISLES BEACH, FL 33160**

**ARTICLES III- REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE**

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

**GEORGE SCHOLL, 334 ATLANTIC ISLE, SUNNY ISLES BEACH, FL 33160**

Having been named as registered agent and to accept service of process for the above state 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.



\_\_\_\_\_  
**GEORGE SCHOLL, Registered Agent**

2019 FEB 25 AM 9:36  
SECRETARY OF STATE  
TALLAHASSEE, FL

**FILED**

(((H19000064252 3)))

(((H19000064252 3)))

ARTICLE IV

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

TITLE:

NAME AND ADDRESS:

MANAGER

STEVEN M. RHODES  
2121 NW 2<sup>ND</sup> AVE., SUITE 206  
MIAMI, FL 33127

MANAGER


GEORGE SCHOLL  
334 ATLANTIC ISLE  
SUNNY ISLES BEACH, FL 33160

ARTICLE -V - Effective Date, if other than the date of filing: \_\_\_\_\_ (Optional)

ARTICLE- VI- Other provisions, if any.

REQUIRED SIGNATURE:

  
\_\_\_\_\_  
STEVEN M. RHODES, Manager

  
\_\_\_\_\_  
GEORGE SCHOLL, Manager

*(In accordance with Section 605.0203 (1)(b), Florida Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein 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 817.135, F.S.)*

(((H19000064252 3)))