

Division of Corporations

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Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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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
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TALLAHASSEE, FL**FILED**

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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**

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**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

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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 2ND 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.)

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