

MAR/19/2019/TUE 11:45 AM

FAX No.

P. 001

3/19/2019

Division of Corporations

Florida Department of State
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**FLORIDA LIMITED LIABILITY CO.
MONTE CARLO CONDO #D615, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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MAR 20 2019

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MONTE CARLO CONDO #D615, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:496 NW 165TH ST RD#D615MIAMI, FL 33169Mailing Address:5121 SW 133 AVEMIAMI, FL 33175

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:

RFH PROPERTY MANAGEMENT, LLC

Name

5121 SW 133 AVEFlorida street address (P.O. Box NOT acceptable)MIAMIFL33175

City

State

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.

Dominic Rivera

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR _____

Name and Address:

Brian Kelly

Santos Dumont 2355, 2 Piso Dto B Capital Federal
Republica Argentina, Codigo Postal 1426

AMBR _____

Marcel Edit Salazar

Santos Dumont 2355, 2 Piso Dto B Capital Federal
Republica Argentina, Codigo Postal 1426

AMBR _____

Ricardo Ernesto Kelly

Av. Cabildo 248 Piso 6 Capital Federal
Republica de Argentina, Codigo Postal 1426

AMBR _____

Marta Aida Funes

Av. Cabildo 248 Piso 6 Capital Federal
Republica de Argentina, Codigo Postal 1426

(Use attachment if necessary)

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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE



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

This document is executed 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.

Ricardo Ernesto Kelly

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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