

4/3/2019

Division of Corporations

L1900088560

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.

(((H19000110264 3)))



H190001102643A8C7

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 : CORPOLICENSE, INC
Account Number : 120050000118
Phone : (305)774-9606
Fax Number : (305)774-9660

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

Email Address: husbrand@bellsouth.net

FLORIDA LIMITED LIABILITY CO. BRELIZ HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

2019 APR -3 PM 12:17

APR -4 2019
C Kinsey

Electronic Filing Menu

Corporate Filing Menu

Help

H19000 110264

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY
OF
BRELIZ HOLDINGS, LLC**

ARTICLE I - NAME:

The name of the Limited Liability Company is:

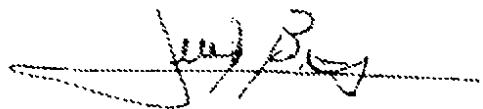
BRELIZ HOLDINGS, LLC

ARTICLE II - ADDRESS:

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

**7600 SW 109th Terrace
Miami, FL 33156**

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:



**Luis Brand
7600 SW 109th Terrace
Miami, FL 33156**

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.

H19000 110264

FILED
19 APR -3 AM 8:57
CLERK OF CIRCUIT
CLERK OF CIRCUIT
CLERK OF CIRCUIT

H19000 110264

ARTICLE IV - Management/Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>TITLE:</u>	<u>NAME AND ADDRESS</u>
AMBR	LUIS BRAND 7600 SW 109 th Terrace Miami, FL 33156
AMBR	MARBELIS BRAND 7600 SW 109 th Terrace Miami, FL 33156



Luis Brand

RECEIVED
CLERK OF STATE
TALLAHASSEE FL 90001

19 APR - 3 AM 8:57

FILED

(In accordance with section 605.0201, Florida Statutes,
The execution of this document constitutes an affirmation under
The penalties of perjury that the facts stated herein are true)

H19000 110264