## L19000 140 324

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

R KEMPI F



000329934530

19 JUN -3 AM II: BI

FILED

RECEIVED

19 JUN -3 AM D: 31

Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 787398 8275007 AUTHORIZATION : COST LIMIT : ORDER DATE: May 31, 2019 ORDER TIME : 9:13 AM ORDER NO. : 787398-001 CUSTOMER NO: 8275007 DOMESTIC FILING NAME: INNER CIRCLE EVENTS, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION \_ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_ CERTIFIED COPY

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT.

1201 Hays Street

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

INNER CIRCI	LE EVENTS, LLC			
(	Must contain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")	_
ARTICLE II - Addre The mailing address a	ess: nd street address of the principal	office of the Limited	Liability Company is:	
	Principal Office Address:		Mailing Ac	<u>ldress</u> :
3895 Poinciar	na Ave	3895	Poinciana Ave	<u>.</u>
Miami, FL 33	133	 Miami	, FL 33133	
another business entit	Company cannot serve as its own y with an active Florida registration rida street address of the registere	on.)	You must designate an	individual or
	Corporation Service Comp	pany		
	<del>, <u>, , ,                               </u></del>	Name		
	1201 Hays Street			
	Florida street addre	(DOD NOT		
	i iorida su cee addre.	ss (P.O. Box <u>NOT</u> ac	cceptable)	
	Tallahassee	ss (P.O. Box <u>NOT</u> ac	32301	
	Tallahassee City	FL State	32301 Zip	
lace designated in this arther agree to comply	Tallahassee  City  registered agent and to accept servicertificate, I hereby accept the appwith the provisions of all statutes recept the obligations of my position  Corporation Services  By	FL State vice of process for the pointment as registere relating to the proper as registered agent o	32301 Zip above stated limited lived agent and agree to a and complete perform the provided for in Chaptage As	ct in this capacity. I cance of my duties, and I

ù

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

"AMBR" = Authorized Member "MGR" = Manager AMBR  Maria Cristina Nuflez de Turco-Rivas 3865 Poinciana Ave Miami, FL 33133  AMBR  (Use attachment if necessary)  LE V: Effective date, if other than the date of filing: [OPTIONAL]  Tective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  The date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date on the Department of State's records.  LE VI: Other provisions, if any.  REOUIRED SIGNATURE:  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.  Maria Cristina Nuflez de Turco-Rivas  Typed or printed name of signee  Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certifical Copy (Optional) \$5.00 Certifical Copy (Optional)	Title:	Name and Address:	
Maria Cristina Nufaz de Turco-Rivas  3865 Poinciana Ave Mamil, Fl. 33133  AMBR  Cristina Turco Rivas 3865 Poinciana Ave Mamil, Fl. 33133  (Use attachment if necessary)  LE V: Effective date, if other than the date of filing:  (OPTIONAL)  fective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records.  LE VI: Other provisions, if any.  REOUIRED 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.  Maria Cristina Nufaz de Turco-Rivas  Typed or printed name of signee  Filling Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent  \$30.00 Certified Copy (Optional)		Der	
AMBR  Cristina Turco Rivas 3865 Poinciana Ave Miami, FL 33133  (Use attachment if necessary)  LE V: Effective date, if other than the date of filing:  (OPTIONAL)  fective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ument's effective date on the Department of State's records.  LE VI: Other provisions, if any.  REOUIRED 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.  Maria Cristina Nuñez de Turco-Rivas  Typed or printed name of signee  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent  \$30.00 Certified Copy (Optional)	•	Maria Cristina Nuñoz da Turon Divas	
(Use attachment if necessary)  (OPTIONAL)	АМОН	<del></del>	<del></del>
(Use attachment if necessary)  LE V: Effective date, if other than the date of filing:			······································
(Use attachment if necessary)  LE V: Effective date, if other than the date of filing:			
(Use attachment if necessary)  LE V: Effective date, if other than the date of filing:	AMBR	Cristina Turco Rivas	<u> </u>
(Use attachment if necessary)  LE V: Effective date, if other than the date of filing:			
LE V: Effective date, if other than the date of filing:  [COPTIONAL]  [Fective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date on the Department of State's records.  [LE VI: Other provisions, if any.  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date on the Department of State's records.  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date will not ament's effective date on the Department of State on a uniformation for a member.  [In the date in statutory filing requirements, this date will not ament's effective		Miami, FL 33133	<del></del>
LE V: Effective date, if other than the date of filing:  [COPTIONAL]  [Fective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date on the Department of State's records.  [LE VI: Other provisions, if any.  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date on the Department of State's records.  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date will not ament's effective date on the Department of State on a uniformation for a member.  [In the date in statutory filing requirements, this date will not ament's effective			
REOUIRED SIGNATURE:    This document is executed in a corodance 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.    Maria Cristina Nuñez de Turco-Rivas   Tiling Fees:   \$30.00 Certified Copy (Optional)   Tiling Fees:   Copy of Filing Fees for Articles of Organization and Designation of Registered Agent   Tolor of the provision of the provi			
REOUIRED SIGNATURE:    This document is executed in a corodance 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.    Maria Cristina Nuñez de Turco-Rivas   Tiling Fees:   \$30.00 Certified Copy (Optional)   Tiling Fees:   Copy of Filing Fees for Articles of Organization and Designation of Registered Agent   Tolor of the provision of the provi			<u></u>
REOUIRED SIGNATURE:    This document is executed in a corodance 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.    Maria Cristina Nuñez de Turco-Rivas   Tiling Fees:   \$30.00 Certified Copy (Optional)   Tiling Fees:   Copy of Filing Fees for Articles of Organization and Designation of Registered Agent   Tolor of the provision of the provi			
LE V: Effective date, if other than the date of filing:  [COPTIONAL]  [Fective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date on the Department of State's records.  [LE VI: Other provisions, if any.  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date on the Department of State's records.  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date will not ament's effective date on the Department of State on a uniformation for a member.  [In the date in statutory filing requirements, this date will not ament's effective			
LE V: Effective date, if other than the date of filing:  [COPTIONAL]  [Fective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date on the Department of State's records.  [LE VI: Other provisions, if any.  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date on the Department of State's records.  [In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ament's effective date will not ament's effective date on the Department of State on a uniformation for a member.  [In the date in statutory filing requirements, this date will not ament's effective			<del></del>
REOUIRED SIGNATURE:    This document is executed in a corodance 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.    Maria Cristina Nuñez de Turco-Rivas   Tiling Fees:   \$30.00 Certified Copy (Optional)   Tiling Fees:   Copy of Filing Fees for Articles of Organization and Designation of Registered Agent   Tolor of the provision of the provi			<del></del>
REOUIRED SIGNATURE:    This document is executed in a corodance 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.    Maria Cristina Nuñez de Turco-Rivas   Tiling Fees:   \$30.00 Certified Copy (Optional)   Tiling Fees:   Copy of Filing Fees for Articles of Organization and Designation of Registered Agent   Tolor of the provision of the provi	(I I		
RECUIRED SIGNATURE:  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.  Maria Cristina Nuñez de Turco-Rivas  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)	(Ose attachment if necessary)		
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.  Maria Cristina Nuñez de Turco-Rivas  Typed or printed name of signee  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent  \$30.00 Certified Copy (Optional)	of filing.) f the date inserted in this block	does not meet the applicable statutory filing requirements, th	
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.  Maria Cristina Nuñez de Turco-Rivas  Typed or printed name of signee  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)	of filing.)  If the date inserted in this block  Iment's effective date on the E	does not meet the applicable statutory filing requirements, the epartment of State's records.	
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.  Maria Cristina Nuñez de Turco-Rivas  Typed or printed name of signee  Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)	of filing.) If the date inserted in this block Imment's effective date on the D  LE VI: Other provisions, if any  REOUIRED SIGNATURE  ON!!	does not meet the applicable statutory filing requirements, the epartment of State's records.	is date will not be
constitutes a third degree felony as provided for in s.817.155, F.S.  Maria Cristina Nuñez de Turco-Rivas  Typed or printed name of signee  Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)	of filing.) If the date inserted in this block iment's effective date on the E.E. E.VI: Other provisions, if any  REOUIRED SIGNATURE  Signat	does not meet the applicable statutory filing requirements, the epartment of State's records.  Liphua H. di Luca - Kiras  are of a member or an authorized representative of a mem	is date will not be
Maria Cristina Nuñez de Turco-Rivas  Typed or printed name of signee  Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)	of filing.) If the date inserted in this block iment's effective date on the Example of the Exam	does not meet the applicable statutory filing requirements, the epartment of State's records.  J. di Justo-Visas  are of a member or an authorized representative of a memori is executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed in accordance with section 605.0203 (1) (b), Floring requirements, the executed fill accordance with section 605.0203 (1) (b), Floring requirements, the executed fill accordance with section 605.0203 (1) (b), Floring requirements, the executed fill accordance with section 605.0203 (1) (b), Floring requirements, the executed fill accordanc	is date will not be
Typed or printed name of signee  Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)	of filing.) If the date inserted in this block Imment's effective date on the D  LE VI: Other provisions, if any  REOUIRED SIGNATURE  Signat  This docume I am aware the	does not meet the applicable statutory filing requirements, the epartment of State's records.  Linear J. de Luca -	is date will not be
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)	of filing.) If the date inserted in this block Imment's effective date on the D  LE VI: Other provisions, if any  REOUIRED SIGNATURE  Signat  This docume I am aware the constitutes a	does not meet the applicable statutory filing requirements, the epartment of State's records.  J. de Justo – Justo  are of a member or an authorized representative of a memor is executed in accordance with section 605.0203 (1) (b), Float any false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.	is date will not be
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)	of filing.) If the date inserted in this block Imment's effective date on the D  LE VI: Other provisions, if any  REOUIRED SIGNATURE  Signat  This docume I am aware the constitutes a	does not meet the applicable statutory filing requirements, the epartment of State's records.  Living A. di Living Living  are of a member or an authorized representative of a memor is executed in accordance with section 605.0203 (1) (b), Float any false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.	is date will not be
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)	of filing.) If the date inserted in this block Imment's effective date on the D  LE VI: Other provisions, if any  REOUIRED SIGNATURE  Signat  This docume I am aware the constitutes a	does not meet the applicable statutory filing requirements, the epartment of State's records.  Living A. di Living Living  are of a member or an authorized representative of a memor is executed in accordance with section 605.0203 (1) (b), Float any false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.	is date will not be
\$ 30.00 Certified Copy (Optional)	of filing.) If the date inserted in this block Imment's effective date on the D  LE VI: Other provisions, if any  REOUIRED SIGNATURE  Signat  This docume I am aware the constitutes a	does not meet the applicable statutory filing requirements, the partment of State's records.  J. de Jusco-Kerro  are of a member or an authorized representative of a mem nt is executed in accordance with section 605.0203 (1) (b), Float any false information submitted in a document to the Depart hird degree felony as provided for in s.817.155, F.S.  ristina Nuñez de Turco-Rivas  Typed or printed name of signee	is date will not be
\$ 5.00 Certificate of Status (Optional)	representation of filing.)  If the date inserted in this block interest is effective date on the Extended in this block interest. The control of the Extended in this block in in this bloc	does not meet the applicable statutory filing requirements, the partment of State's records.   J. de Jusce-Line  are of a member or an authorized representative of a mem at is executed in accordance with section 605.0203 (1) (b), Float any false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.  Institute Number do Turco-Rivas  Typed or printed name of signee  Filing Fees:	ber.  berstatutes.  treent of State
$\tilde{\psi} = \omega$	of filing.)  If the date inserted in this block  Imment's effective date on the Extended in this block  I will be the continuous of the co	does not meet the applicable statutory filing requirements, the epartment of State's records.  Living H. de Living Living  are of a member or an authorized representative of a member is executed in accordance with section 605.0203 (1) (b), Float any false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.  Instina Nuñez de Turco-Rivas  Typed or printed name of signee  Filing Fees:  Instina of Organization and Designation of Registered Agent ptional)	ber.  berstatutes.  treent of State
$_{V}$ . $\omega$	of filing.)  If the date inserted in this block  Imment's effective date on the Extended in this block  I will be the continuous of the co	does not meet the applicable statutory filing requirements, the epartment of State's records.  Living H. de Living Living  are of a member or an authorized representative of a member is executed in accordance with section 605.0203 (1) (b), Float any false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.  Instina Nuñez de Turco-Rivas  Typed or printed name of signee  Filing Fees:  Instina of Organization and Designation of Registered Agent ptional)	ber. orida Statutes. tment of State
	of filing.)  If the date inserted in this block  Imment's effective date on the Extended in this block  I will be the continuous of the co	does not meet the applicable statutory filing requirements, the epartment of State's records.  Living H. de Living Living  are of a member or an authorized representative of a member is executed in accordance with section 605.0203 (1) (b), Float any false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.  Instina Nuñez de Turco-Rivas  Typed or printed name of signee  Filing Fees:  Instina of Organization and Designation of Registered Agent ptional)	ber.  berstatutes.  treent of State
	the date inserted in this block the date inserted in this block the date on the Example 1. The series of the serie	does not meet the applicable statutory filing requirements, the epartment of State's records.  Living H. de Living Living  are of a member or an authorized representative of a member is executed in accordance with section 605.0203 (1) (b), Float any false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.  Instina Nuñez de Turco-Rivas  Typed or printed name of signee  Filing Fees:  Instina of Organization and Designation of Registered Agent ptional)	ber. orida Statutes. tment of State

as