

7/15/2019

Division of Corporations

FAX AUDIT NO.: H19000213299 3

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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : MICHAEL J. FREEMAN, P.A.
Account Number : 072720000142
Phone : (305)442-1567
Fax Number : (305)442-1227

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

Email Address: mfreeman@freemanmiami.com

FLORIDA LIMITED LIABILITY CO. NARANJA HOMES LLC

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

NARANJA HOMES LLC

ARTICLE II – Address:

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

Principal Office Address: 2601 S. Bayshore Drive
Suite 1200
Coconut Grove, FL 33133

Mailing Address: 2601 S. Bayshore Drive
Suite 1200
Coconut Grove, FL 33133

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

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

M.J. F. Registered Agent Corp.
Name

153 Sevilla Avenue
Florida Street Address (No P.O. Box)

Coral Gables, FL 33134
City, State, and Zipcode

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..

Michael J. Freeman Pres.
Registered Agent's Signature
(Michael J. Freeman, President)

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ARTICLES OF ORGANIZATION
FOR NARANJA HOMES LLC
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ARTICLE IV – Manager(s) or Managing Member(s):

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

Title:

"AMBR" = Authorized Member
"MGR" = Manager

Name and Address:

AMBR

Ricardo Eichenwald, as Trustee of
The Ricardo Eichenwald Revocable
Trust dated July 1, 2008
2601 S. Bayshore Drive
Suite 1200
Coconut Grove, FL 33133

AMBR

Joseph Horn, as Trustee of The
Joseph Horn Revocable Trust
Agreement dated August 11, 2008
2601 S. Bayshore Drive
Suite 1200
Coconut Grove, FL 33133

AMBR

Ralph Horn
2601 S. Bayshore Drive
Suite 1200
Coconut Grove, FL 33133

AMBR

Secisa International Ltda, Inc.
5820 SW 73 Avenue
Miami, FL 33143

AMBR

Santo Antonio Investing Corp.
1100 S. Federal Highway
Suite 505
Deerfield Beach, FL 33441

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FOR NARANJA HOMES LLC
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REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

(In accordance with section 605.0203 (1) (b), Florida Statutes, 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 S. 817.155, F.S.)

Ricardo Eichenwald, as Trustee of The Ricardo Eichenwald
Revocable Trust dated July 1, 2008

Type or print name of signer

Filing Fees:

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

\$30.00 Certified Copy (Optional)

\$5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA

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