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Florida Department of State
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : GEOFFREY M. WAYNE, P.A.
Account Number : 076770003401
Phone : (305)381-8108
Fax Number : (305)381-8109

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

Email Address: GN@ATTORNEYMIAMI.COM

FLORIDA LIMITED LIABILITY CO.
1950 INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
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N. SAMS
SEP 11 2019

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **1950 INVESTMENTS LLC**

ARTICLE II- Address:

The mailing address of the Limited Liability Company is: **60 Shore Dr. W., Coconut Grove, FL 33133**

The street address of the principal office of the Limited Liability Company is: **60 Shore Dr. W., Coconut Grove, FL 33133**

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

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

**Excelsior Corporate Services LLC
135 San Lorenzo Ave., PH 840
Coral Gables, FL 33146**

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.

Alexis I. Marrero Koratich - as VP of Excelsior Corporate Services
Registered Agent's Signature

ARTICLE IV - Management

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

AMBR

**Salvador Alberto Sacasa
60 Shore Dr. W.
Coconut Grove, FL 33133**

ARTICLE V - Effective date, if other than the date of filing: _____

ARTICLE IV - Other Provisions, if any.

Alexis I. Marrero Koratich - authorized representative of a member
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.)

Alexis I. Marrero Koratich, Esq.
Typed or printed name of signee

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization**
- \$ 25.00 Designation of Registered Agent**
- \$ 30.00 Certified Copy (OPTIONAL)**
- \$ 5.00 Certificate of Status (OPTIONAL)**

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