## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## FLORIDA LIMITED LIABILITY CO. RIDAO LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu J DENNIS Help

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SEP 1 2 2019

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CÓMPANY 18 SEP 11 711 2: 07

ARTICLE I - Name: The name of the Limited Liability	Company is:			
, miles of the Emiles		•		
RIDAO LLC				
(Must conta	n the words "Limited	Liability Compan	y, "L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street add	iress of the principal o	office of the Limit	ed Liability Company is:	
<u>Principa</u>	Office Address:		Mailing Ac	dress:
10710 SW 40th MAN	OR			<del></del>
DAVIE, FL 33328			ME	
		<del></del>		
ARTICLE III - Registered Ages (The Limited Liability Company of another business entity with an ac-	annot serve as its own	n Registered Agen	gent's Signature: t. You must designate an	individual or
The name and the Florida street a	ddress of the registere	d agent are:	,	
	MARINA RIDAO N	10LINARES		
•		Namè		
	10740 SW 40th MA	NOR		
	Florida street addre	ss (P.O. Box <u>NOT</u>	acceptable)	
	DAVIE	FL	33328	
	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 am familiar with and accept the obligations of my position ps registered agent as provided for in Chapter 605, F.S..

Registered Agert's Signature (REQUIRED

19 SEP 11 PH 2:

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.	Title:		Name and Address:
MARINA RIDAO MOLINARES  10740 SW 40th MANOR  DAVIE, FL 33328  (Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:			
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days te of filing.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be bis comment's effective date on the Department of State's records.  CLE VI: Other provisions, if any.  REOUTRED SIGNATURE:  Signature of a member of 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.	"MGR" = Mar	ager	
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Filing Fees:

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