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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 : RASCO KLOCK PEREZ & NIETO, P.L.
Account Number : 104076000124
Phone : (305)476-7100
Fax Number : (305)476-7102

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

Email Address: abazo@rascoklock.com

**FLORIDA LIMITED LIABILITY CO.
RCM 7300, LLC**

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

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2019 OCT 15 AM 10:33
CLERK OF COURT
JANICE B. GIBSON

ARTICLES OF ORGANIZATION

In compliance with Chapter 605, F.S. (Limited Liability Company Act)

ARTICLE I- NAME: The name of the Florida limited liability company is: **RCM 7300, LLC**

ARTICLE II- ADDRESS: The principal and mailing address of the limited liability company is: **RCM 7300, LLC** 901 S Royal Poinciana Blvd Miami Springs FL 33166

ARTICLE III- PURPOSE: The limited liability company shall be holding real estate and stock in different properties and companies, as well as any and all lawful purposes and members and managers may consider from time to time.

ARTICLE IV- REGISTERED AGENT: The name and address of the registered agent of the corporation is: **TRANSWORLD BUSINESS MANAGEMENT, LLC** 2555 Ponce de Leon Blvd., Suite 600 Coral Gables FL 33134

ARTICLE V- MANAGERS: The name and address of person(s) authorized to manage the limited liability company:

Manager- JUAN JOSE FERNANDEZ MACHADO

Manager- ANDREA COLMENARES FERNANDEZ

All managers shall have the address- 901 S Royal Poinciana Blvd Miami Springs FL 33166

ARTICLE VIII- INCORPORATOR: The name and address of the incorporator is: **TRANSWORLD BUSINESS MANAGEMENT, LLC** 2555 Ponce de Leon Blvd Suite 600 Coral Gables FL 33134

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Registered Agent

10/15/19

Date

I submit this document and affirm 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.

Incorporator

10/15/19

Date

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