Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Doing so will generate another cover sheet.

To:			AON 610
	Division of Corporations	<u> </u>	=
	Fax Number : (850)617-6381	5 5 2	
From:		X. 1.	_
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.		;:- -
	Account Number : I20000000019	'	50
	Phone : (3 0 5)552-5973		35
	Fax Number : (305)675-5944	- :	
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••Enter an	the email address for this business entity to be used for finual report mailings. Enter only one email address please.*	Future *	
En	aail Address:	_	

FLORIDA LIMITED LIABILITY CO. MIAMI 1921 HOSTEL LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

N. SAMS

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: (Must end with the words "Limited . iability Company,
"L.L.C.," or "LLC")
MIAMI 1921 HOSTEL LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability
Company is: 302 NE 55 TEPRACE
WIARD! FL 33/37
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liability)
Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
AlAIN 6002A/EZ
302 NE SS TERRACE
lliacy F/. 33/37
ARTICLE IV-
The name and title of each person authorized to manage and control the Limited Liability Company:
AlAIN GONZALEZ AMBR

Required Signatures:

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.

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..

Registered Agent's Signature (REOUIRED)