Account Number : I20000000146 : (305)444-4994 Phone Fax Number : (365)444-4977

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

Email Address:\_

## FLORIDA LIMITED LIABILITY CO. SAN JOSE AMEN LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED HABILITY COMPANY

•		
SAN JOSE AMEN LLC (Must conatin the words "Limited Liabil	lity Company of I C " as 41 C %	
ARTICLE II - Address: The mailing address and street address of the principal office of		
Principal Office Address:	Mailing Address:	
PEMBROKE PINES, FL 33025	SAME	
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Registantener business entity with an active Florida registration.)	stered Agent. You must designate an individual or	JIVISION (
The name and the Florida street address of the registered agen-	t are:	1
ALFREDO RAMOS		
Nan	ne .	<b>7.</b> 88
11376 SW 3RD ST		
Florida street address (P.O	. Box NOT acceptable)	<b>ာ</b> သည္သ

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 pravisions 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.

State

Zip

PEMBROKE PINES City

(CONTINUED)

Title: "AMBR" = Authorized Memi "MGR" = Manager	Name and Address: per
MGR	MARILU JOSEFINA ARAOUE DE ABREU 9414 SW 156 CT MIAMI, FL 33196
MGR	JUAN CARLOS ABREU ARAQUE 9414 SW 156 CT MIAMIL FL 33196
MGR	MARIA ALEXANDRA ABREU ARAQUE 9-11-4 SW 156 CT MIAMI, FI, 33196
neticave date is listed, the date in ate of filing.)  If the date inserted in this block	in the date of filing:
ICLE V: Effective date, if other tis a effective date is listed, the date n ate of filing.)	ust be specific and cannot be more than five business days prior to or 90 days a does not meet the applicable statutory filing requirements, this date will not be lief
ICLE V: Effective date, if other the confective date is listed, the date is ate of filing.)  If the date inserted in this block locument's effective date on the De	nest he specific and cannot be more than five business days prior to or 90 days a does not meet the applicable statutory filing requirements, this date will not be lie.

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

\$ 38.00 Certified Copy (Optional)
5 5.00 Certificate of Status (Optional)