Florida Department of State

2020-07-21 03:55:03 (GMT)

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.

(((H20000235382 3)))



H200002353823ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ANTONIO ALONSO, PLLC.

Account Number : I20160000045 Phone : (305)606-0399 Fax Number : (305)508-6364

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

Email	Address:	alor	ารดลติลล	palaw.com	

FLORIDA LIMITED LIABILITY CO. CLX ENLINEA, LLC

Certificate of Status	l l
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

2820 JUL 21 AM II: 27

DI JISH - TO DEPORATIONS
BURGAN OF TOMMERCIAL

スロッローV T部

H200002353823

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
2.14		
(Must end with the words "Li	ILINEA_LLC .imited Liability Company, "L.L.C.," or "Ll.C.")	-
ARTICLE II - Address: The mailing address and street address of the princ	12	202i
Principal Office Address:	Mailing Address:	CRET
999 PONCE DE LEON BLVD SUITE 650 CORAL GABLES, FL 33134	SAME SS	21 AM
ARTICLE III - Registered Agent, Registered O	S OWD Registered Agent. You must designate an in C3	Sign in
The name and the Florida street address of the regis	istered agent are:	
	NAGEMENT SERVICES, LLC Name	
999 PONCE DE Florida street address (P.O	LEON BLVD. SUITE 650 D. Box <u>NOT</u> acceptable)	
CORAL GABL		
City	Zip	
capacity. I further agree to comply with the provis of my duties, and I am familiar with and accept the	ept service of process for the above stated limited liabil accept the appointment as registered agent and agree t isions of all statutes relating to the proper and complete the obligations of my position as registered agent as proChapter 605, F.S	to act in this
Hiram	D. Ocariz Signature (REOSTRED)	
Registered Agent's 5	Signature (REQUIRED)	
(CONT	TINUED)	
Page	e1of2 H20	000235382 3

H200002353823

MGR = Manager MGR ASSAF TAREK SALIM 999 PONCE DE LEON BLVD., SUITE 650 CORAL GABLES. FL 33134 (Use attachment if necessary) (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 priogram 90 december 100 dec	ASSAF TAREK SALIM 999 PONCE DE LEON BLVD. SUITE 650 CORAL GABLES. FL 33134 AND SECUL 21 AND SECU	Title:	Name and Address:	
ASSAF TAREK SALIM 999 PONCE DE LEON BLVD. SUITE 650 CORAL GABLES. FL 33134 (Use attachment if necessary) (Use attachment if necessary) CLE V: Effective date, if other than the date of filing: (OPTIONALLY Seffective days prior 90 attentions)	ASSAF TAREK SALIM 999 PONCE DE LEON BLVD. SUITE 650 CORAL GABLES. FL 33134 CORAL GABLES. FL 33134 Description of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member.	"AMBR" = Authorized Member		
(Use attachment if necessary) (Use attachment if necessary) (Use attachment if necessary) (Use attachment if necessary) (OPTIONAL)	999 PONCE DE LEON BLVD. SUITE 650 CORAL GABLES. FL 33134 CORAL GABLES. FL 33134	<u> </u>		
(Use attachment if necessary) (Use attachment if necessary) (Use attachment if necessary) (Use attachment if necessary) (OPTIONATIONATION OPTIONATION OPTIONAT	correction of this decument of the third of	MGR	ASSAF TAREK SALIM	
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing: Clear of filing.) Copyright (OPTION And Copyright)	ment if necessary) Coption Copt		999 PONCE DE LEON BLVD., SUITE 650	
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONALLY Signature of a member or an authorized representative of a member. accordance with section 605,0203 (1) (b). Florida Statutes, the execution of this document		CORAL GABLES, FL 33134	
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONALLY Signature of a member or an authorized representative of a member. accordance with section 605,0203 (1) (b). Florida Statutes, the execution of this document			
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONALLY Signature of a member or an authorized representative of a member. accordance with section 605,0203 (1) (b). Florida Statutes, the execution of this document			
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONALY Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document			
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONALLY Signature of a member or an authorized representative of a member. accordance with section 605,0203 (1) (b). Florida Statutes, the execution of this document			
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONALY Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document			
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONALY Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document			
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONALY Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document			
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONAL S Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document		——————————————————————————————————————	№
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONAL S Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document			92(
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONAL S Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document			<u></u>
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONAL S Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document			
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONAL S Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document		55	N
CLE V: Effective date, if other than the date of filing:	provisions, if any. OPTIONAL S Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	(I low attack are at 16	SE	
effective date is listed, the date must be specific and cannot be more than five business days prior 90 are of filing.)	provisions, if any. D SIGNATURE: Signature of a member or an authorized representative of a member. a accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	(Use attachment if necessary)		
effective date is listed, the date must be specific and cannot be more than five business days prior to the of filing.)	provisions, if any. Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	(Ose attachment if necessary)	m _e	7
ce of filing.)	Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	••	Simple contract the contract th	P
	Signature of a member or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	LEV: Effective date, if other than the date of	of filing: (OPTIONAL). cilic and cannot be more than five business days prio@bout 91	
CLE VI: Other provisions, if any.	Signature of a member or an authorized representative of a member. a accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	LE V: Effective date, if other than the date of fective date is listed, the date must be specified.	of filing: (OPTIONAL). cilic and cannot be more than five business days prio to 9	0 (19) /s
	Signature of a member or an authorized representative of a member.	LEV: Effective date, if other than the date of fective date is listed, the date must be spece of filing.)	of filing: (OPTIONAL) (OPTIONAL) cilic and cannot be more than five business days prior so that five business days days days days days days days da	0 (19) /s
	Signature of a member or an authorized representative of a member. a accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	LEV: Effective date, if other than the date of fective date is listed, the date must be spece of filing.)	of filing: (OPTIONAL) of filing:	0 (19) /s
	Signature of a member or an authorized representative of a member.	LEV: Effective date, if other than the date of fective date is listed, the date must be spece of filing.)	of filing: (OPTIONAL) cilic and cannot be more than five business days prior than five business days days days days days days days da	0 (19) /s
	Signature of a member or an authorized representative of a member. a accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	LEV: Effective date, if other than the date of fective date is listed, the date must be spece of filing.)	of filing: (OPTIONAL) (OPTIONAL) cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than five business days prior to the cilic and cannot be more than the cilic and cannot be cilic and cannot be called an actual to the cilic and cannot cannot be called an actual to the cilic and cannot	0 (19) /s
DECLUBED SIGNATURE.	Signature of a member or an authorized representative of a member.	LEV: Effective date, if other than the date of fective date is listed, the date must be spece of filing.)	of filing: (OPTIONAL). cific and cannot be more than five business days prior 91	0 (19) /s
ALLOURED SIGNATURE:	a accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	LE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) (I.E. VI: Other provisions, if any.	of filing: (OPTIONAL) (OPTIONAL) cilic and cannot be more than five business days prior 90	0 (19) /s
V Val. 1	a accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	LEV: Effective date, if other than the date of fective date is listed, the date must be spece of filing.)	of filing: (OPTIONAL) cific and cannot be more than five business days prior 90	0 (19) /s
Signature of a mambar or an outhorized agent and the	a accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document	LE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) (I.E. VI: Other provisions, if any.	of filing: (OPTIONAL) cific and cannot be more than five business days prior 91	0 (19) /s
(In accordance with section 605 0203 (1) (b) Florida Statutes the assessing of this decimal	estitutes an affirmation under the penalties of periory that the first stated became and	LE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE:	cilic and cannot be more than five business days prio the spin of	0 (19) /s
Constitutes an affirmation under the penalties of persons that the facts of this document		ILE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) ILE VI: Other provisions, if any. REQUIRED SIGNATURE:	cific and cannot be more than five business days prior than the five business days days days days days days days da	0 (19) /s
I am aware that any false information submitted in a document to the Department of State	im aware that any false information submitted in a document to the Department of State	ILE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) ILE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605)	uber or an authorized representative of a member.	0 (19) /s
the begannient of State		ILE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) ILE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated begin are true.	0 (19) /s
constitutes a third degree felony as provided for in s.817.155, F.S.)	institutes a third degree felony as provided for in s.817.155, F.S.)	CLE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) T.E. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State	0 (19) /s
constitutes a third degree felony as provided for in s.317.155, F.S.)	institutes a third degree felony as provided for in s.817.155, F.S.)	CLE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) T.E. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State	0 (19) /s
constitutes a third degree felony as provided for in s.817.155, F.S.) ASSAF TAREK SALIM	ASSAF TAREK SALIM	REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	uber or an authorized representative of a member. 1.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ination submitted in a document to the Department of State as provided for in s.817.155, F.S.) ASSAF TAREK SALIM	0 (19) /s
constitutes a third degree felony as provided for in s.817.155, F.S.)	ASSAF TAREK SALIM	REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	uber or an authorized representative of a member. 1.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ination submitted in a document to the Department of State as provided for in s.817.155, F.S.) ASSAF TAREK SALIM	0 (19) /s
Constitutes a third degree felony as provided for in s.817.155, F.S.) ASSAF TAREK SALIM Typed or printed name of signee	ASSAF TAREK SALIM Typed or printed name of signee	REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	uber or an authorized representative of a member. 1.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. Institute that in a document to the Department of State as provided for in s.317.155, F.S.) ASSAF TAREK SALIM Typed or printed name of signee	0 (19) /s
CONSTITUTES a third degree felony as provided for in a \$17,155, E.S.	estitutes a third degree felony as provided for in a \$17,145, E.S.)	CLE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) T.E. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State	0 (19) /s
constitutes a third degree felony as provided for in s.\$17.155, F.S.)	institutes a third degree felony as provided for in s.817.155, F.S.)	CLE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) T.E. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State	0 (19) /s
constitutes a third degree felony as provided for in s.817.155, F.S.)	enstitutes a third degree felony as provided for in s.817.155, F.S.)	CLE V: Effective date, if other than the date of flective date is listed, the date must be spece of filing.) T.E. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State	0 (19) /s
constitutes a third degree felony as provided for in s.817.155, F.S.)	ASSAF TAREK SALIM	REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	uber or an authorized representative of a member. 1.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ination submitted in a document to the Department of State as provided for in s.817.155, F.S.) ASSAF TAREK SALIM	0 (19) /s
constitutes a third degree felony as provided for in s.817.155, F.S.) ASSAF TAREK SALIM	ASSAF TAREK SALIM	LEV: Effective date, if other than the date of flective date is listed, the date must be species of filing.) LEVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	uber or an authorized representative of a member. 1.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ination submitted in a document to the Department of State as provided for in s.817.155, F.S.) ASSAF TAREK SALIM	0 (19) /s
constitutes a third degree felony as provided for in s.817.155, F.S.) ASSAF TAREK SALIM	ASSAF TAREK SALIM	LE V: Effective date, if other than the date of flective date is listed, the date must be specific of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	uber or an authorized representative of a member. 1.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ination submitted in a document to the Department of State as provided for in s.817.155, F.S.) ASSAF TAREK SALIM	0 (19) /s
constitutes a third degree felony as provided for in s.817.155, F.S.)	ASSAF TAREK SALIM Typed or printed name of signee Filing Fees:	REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ination submitted in a document to the Department of State as provided for in s.817.155, F.S.) ASSAF TAREK SALIM Typed or printed name of signee Filing Fees:	0 (19) /s