

7/7/2020

Division of Corporations

Florida Department of State  
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To:

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Account Name : THERREL BAISDEN, LLP  
Account Number : 120140000065  
Phone : (305)371-5758  
Fax Number : (305)371-3178

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

Email Address: aasil74@yahoo.com

FLORIDA LIMITED LIABILITY CO.  
835 NE 212 TERRACE UNIT 1, LLC

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

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ARTICLES OF ORGANIZATION  
FOR  
835 NE 212 TERRACE UNIT 1, LLC

ARTICLE I  
Name

The name of the Limited Liability Company is 835 NE 212  
TERRACE UNIT 1, LLC.

ARTICLE II  
Address

The mailing address and street address of the principal  
office of the Limited Liability Company is: 15645 Collins Avenue,  
Apt 602, Sunny Isles Beach, FL 33160.

ARTICLE III  
Existence; Duration

This limited liability company shall have a perpetual  
existence, unless dissolved according to law, effective as of the  
17<sup>th</sup> day of August, 2020.

ARTICLE IV  
Registered Agent

The street address of the initial registered office of the  
Limited Liability Company shall be Therrel Baisden LLP, SunTrust  
International Center, One S.E. 3rd Avenue, Suite 2950, Miami,  
Florida 33131, and the name of the initial registered agent of  
the Limited Liability Company at that address is: Jonathan  
Feuerman, Esq.

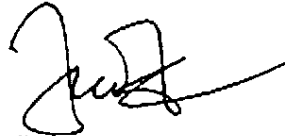
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**ARTICLE V**  
**Manager-Managed Company**

The Limited Liability Company is to be managed by one or more managers and is therefore a manager-managed company. The name and address of the initial manager of this corporation is: **MARINA OMERHODZIC ASIL** at: 15645 Collins Avenue, Apt 602, Sunny Isles Beach, FL 33160.

The undersigned authorized representative of the members of 835 NE 212 TERRACE UNIT 1, LLC, hereby executes these articles of organization on this 17<sup>th</sup> day of August, 2020.



\_\_\_\_\_  
Jonathan Feuerman,  
authorized representative

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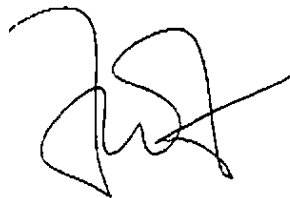
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT  
IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is **835 NE 212  
TERRACE UNIT 1, LLC.**
2. The name and the Florida street address of the registered  
agent and office are:

Jonathan Feuerman, Esquire  
Therrel Baisden LLP  
SunTrust International Center  
One S.E. 3rd Avenue, Suite 2950  
Miami, Florida 33131

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.



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Jonathan Feuerman