

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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Account Number: I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944  Penter 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.  NOEL'S TREE VILLAGE LLC  Certificate of Status  1	Phone : (305)552-5973 Fax Number : (305)675-5944  PEnter the email address for this business annual report mailings. Enter only one Email Address:  FLORIDA LIMITED LIA NOEL'S TREE VILLA	entity to be used f	or future
NOEL'S TREE VILLAGE LLC	FLORIDA LIMITED LIA NOEL'S TREE VILLA	email address pleas	se.**
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Certificate of Status	Certificate of Status		٠.٠
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Noels Tree Village LCC
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability  Company is:
6820-Indian Creek Drive Apt 30
Miani Beach, Florida 33141
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.)
Doris Socorro
6820 - Indian Creek Drive Popt 3C
Miani Beach, fl 33141
ARTICLE IV  The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
Donis Socorro (AMBR)
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## 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.3.

ORIS SOCORRO

Typed or printed name of signee

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 herely 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 (REQUIRED)