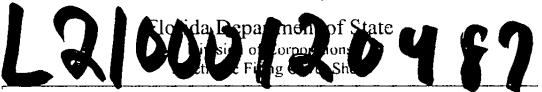
3/23/2021

Division of Corporations



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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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ASLAN TAX SERVICES INC

Account Number : I20140000082 Phone

: (305)644-9144

Fax Number

: (786)477-5802

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.

Tinny Real Estate LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

MAR 2 4 2021

T. SCOTT

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

	New Filing Sec Division of Co				
SUBJEC		EAL ESTATE LLC			
SUINEC	· ·	Name of Li	imited Liabi	lity Company	· · · · · · · · · · · · · · · · · · ·
The enclo	osed Articles of	Organization and fee(s) a	ire submitte	i for filing.	
Please rel	tum all correspo	ondence concerning this n	natter to the	following:	
	ELVIS DIA	z			
			Name o	f Person	
	ASLAN TA	X SERVICES INC			
			Firm/C	этрапу	
	762 SW 18T	'H AVENUE			
			Add	ress	
	MIAMI FL	. 33135			
	ELVIS@ASL	ANTAXSERVICE.COM		nd Zip Code	
		E-mail address: (to be use		annual report notificati	on)
For further	information co	ncerning this matter, plea	se call:		
	ELVIS DIAZ		805	644 -9 144 _)	
	Nam			Daytime Telephon	
Enclosed	is a check for t	he following amount:			
□\$125.0	00 Filing Fcc	■\$130.00 Filing Fee & Certificate of Status	Certif	i5.00 Filing Fee & ied Copy nal copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division P.O. B	ng Address Gling Section on of Corporations Box 6327 assee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

TINNY REAL ESTATE LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address	ž:	

712 NE 16TH TERRACE 712 NE 16TH TERRACE FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304

Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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.)

The name and the Florida street address of the registered agent are:

JOSE MANUEL GOMEZ			•
Name	-		

712 NE 16TH TERRACE

Florida street address (P.O. Box NOT acceptable)

FORT LAUDERDALE	FL	33304
City	State	Zin

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..



(CONTINUED)



**MGR" = Manager AMBR JOSE MANUEL GOMEZ 712 NE 16TH TERRACE FORT LAUDERDALE FL 33304 **MGR" = Manager AMBR HERBERT LEWY 9546 CALLE DIAZ WAY AP 510 COND ASTRALIS CAROLINA PR 00979 AMBR ANDY KAPLAN 370 CALLE 10 APT 115 TRUJILLO ALTO PR 00976 (Use attachment if necessary) E.V: Effective date, if other than the date of filing:	Title:	Name and Address:
AMBR JOSE MANUEL GOMEZ 712 NE 16TH TERRACE FORT LAUDERDALE FL 33304 HERBERT LEWY 9546 CALLE DIAZ WAY AP 610 COND ASTRALIS. CAROLINA PR 00979 AMBR ANDY KAPLAN 370 CALLE 10 APT 115 TRUJILLO ALTO PR 00976 (Use attachment if necessary) LE V: Effective date, if other than the date of filing:	"AMBR" = Authorized Member	
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(Use attachment if necessary) LE V: Effective date, if other than the date of filing:		TRUILLO ALTO PR 00976
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LEV: Effective date, if other than the date of filing:		
LE V: Effective date, if other than the date of filing: (OPTIONAL) ffective date is listed, the date must be specific and cannot be more than five business days prior to or 90 e of filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no nument's effective date on the Department of State's records.		
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Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)