

5/7/2021

Kim Tadlock 8004323622

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Division of Corporations

Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : CAPITOL SERVICES, INC.  
Account Number : I20160000017  
Phone : (855)498-5500  
Fax Number : (800)432-3622

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

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FLORIDA LIMITED LIABILITY CO.  
3201 RIVERVIEW, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

SECRETARY OF STATE  
TALLAHASSEE, FL 32399

21 MAY - 7 AM 1:00

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5/19/21

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**ARTICLES OF ORGANIZATION  
OF  
3201 RIVERVIEW, LLC**

**ARTICLE I: - Name**

The name of the Limited Liability Company is: **3201 RIVERVIEW, LLC**

**ARTICLE II: - Address**

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

**11460 Coral Way  
Miami, Florida 33165**

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

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

**Corporation Service Company  
1201 Hays Street  
Tallahassee, Florida 32301**

*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.*

Corporation Service Company, Registered Agent

By:   
Name: \_\_\_\_\_  
Title: \_\_\_\_\_

**Robert O'Byrne  
Vice President**

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**IN WITNESS WHEREOF**, the undersigned has executed these Articles of Organization on May 7, 2021.

  
\_\_\_\_\_  
Mercy Bazo, Authorized Signer

(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 Section 817.155, Florida Statutes.)

\_\_\_\_\_  
Mercy Bazo  
Typed or printed name of signee

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