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.

(((H21000203149 3)))



H210002031493ABCW

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 : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973 : (305)675-5944

Fax Number

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. 3045 ELIZABETH DEVELOPERS LLC

1
0
03
\$130.00
\$130.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

3045 Elizabeth	Developers LLC		I C " "I [C ")	
(Must	contain the words "Limited Li	ability Company, "L	.L.C.," or "LLC.)	
ARTICLE II - Address: The mailing address and str	eet address of the principal off	ice of the Limited Li	iability Company is:	
<u>Pri</u>	incipal Office Address:		Mailing Address:	
3053 Gifford L	ane	<u>3053 (</u>	Gifford Lane	2 8 2
Miami, FL 331		Miam	i, FL 33133	
The name and the Florida	street address of the registered Perez Abello Law PL	LC		lor
		Name		
	1390 S. Dixie Hwy, S	Suite 1309		
	Florida street address	(P.O. Box NOT ac	ceptable)	
	Coral Gables	FL	33146	
	City	State	Zip	
	stered agent and to accept servi tificate, I hereby accept the appe to the provisions of all statutes re	olnimeni as registere elatino to the proper	and complete performance of n	y duties, and
place designatea in this ceri further agree to comply with am familiar with and accep	t the obligations of my position	Dobelli Gered Agent's Signati	<u> </u>	

ARTICLE IV-

3052201440

litle:	Name and Address:
AMBR" = Authorized Men	nber
MGR" = Manager	
MGR	Juan M. Echeverri
	3053 Cifford Lane
	Miami, FL 33133
	. •
	·
	•
(Use attachment if necessar	лу)
	(OPTIONAL)
	(OPTIONAL)
EV: Effective date, if other ective date is listed, the date	r than the date of filing: (OPTIONAL) the must be specific and cannot be more than five business days prior to or
EV: Effective date, if other ective date is listed, the date	r than the date of filing: (OPTIONAL) the must be specific and cannot be more than five business days prior to or
EV: Effective date, if other ective date is listed, the dat of filing.)	r than the date of filing:
EV: Effective date, if other ective date is listed, the date of filing.) If the date inserted in this bloment's effective date on the	or than the date of filing:
EV: Effective date, if other lective date is listed, the date of filing.)	or than the date of filing:
EV: Effective date, if other ective date is listed, the date of filing.) If the date inserted in this bloment's effective date on the	or than the date of filing:
EV: Effective date, if other ective date is listed, the date of filing.) The date inserted in this bloment's effective date on the	or than the date of filing:
EV: Effective date, if other ective date is listed, the date of filing.) If the date inserted in this bloment's effective date on the	or than the date of filing:
EV: Effective date, if other ective date is listed, the date of filing.) The date inserted in this bloment's effective date on the EVI: Other provisions, if a	re than the date of filing:
EV: Effective date, if other ective date is listed, the date of filing.) The date inserted in this bloment's effective date on the	re than the date of filing:
EV: Effective date, if other ertive date is listed, the date of filing.) The date inserted in this bloment's effective date on the EVI: Other provisions, if a REQUIRED SIGNATURE	re than the date of filing:
EV: Effective date, if other ertive date is listed, the date of filing.) The date inserted in this bloment's effective date on the EVI: Other provisions, if a REQUIRED SIGNATURE.	re than the date of filing: the must be specific and cannot be more than five business days prior to or ock does not meet the applicable statutory filing requirements, this date will be Department of State's records. RE: RE: The Mark of member of an authorized representative of a number.
EV: Effective date, if other ective date is listed, the date of filing.) The date inserted in this bloment's effective date on the EVI: Other provisions, if a REQUIRED SIGNATURE SignaTure date on the SignaTure date on the SignaTure of SignaTure date on the SignaTure of SignaTure date on the SignaTure of	re than the date of filing: the must be specific and cannot be more than five business days prior to or ock does not meet the applicable statutory filing requirements, this date will be Department of State's records. The mature of a member or an authorized representative of a member. The mature of a member or an authorized representative of a member.
EV: Effective date, if other ective date is listed, the date of filing.) I the date inserted in this bloment's effective date on the EVI: Other provisions, if at REQUIRED SIGNATURE Signature of the date of the Signature of the Signature of the date of the Signature of the Signa	re than the date of filing: the must be specific and cannot be more than five business days prior to or ock does not meet the applicable statutory filing requirements, this date will be Department of State's records. The mature of a member or an authorized representative of a member. The mature of a member or an authorized representative of a member. The member is executed in accordance with section 605,0203 (1) (b), Florida Statut re that any false information submitted in a document to the Department of Statut.
EV: Effective date, if other ective date is listed, the date of filing.) I the date inserted in this bloment's effective date on the EVI: Other provisions, if at REQUIRED SIGNATURE Signature of the date of the Signature of the Signature of the date of the Signature of the Signa	re than the date of filing: the must be specific and cannot be more than five business days prior to or ock does not meet the applicable statutory filing requirements, this date will be Department of State's records. RE: mature of a member or an authorized representative of a member. mement is executed in accordance with section 605.0203 (1) (b), Florida Statut re that any false information submitted in a document to the Department of States a third degree felony as provided for in s.817.155, F.S.
EV: Effective date, if other ective date is listed, the date of filing.) I the date inserted in this bloment's effective date on the EVI: Other provisions, if at REQUIRED SIGNATURE Signature of the date of the Signature of the Signature of the date of the Signature of the Signa	re than the date of filing: the must be specific and cannot be more than five business days prior to or ock does not meet the applicable statutory filing requirements, this date will be Department of State's records. The mature of a member or an authorized representative of a member. The mature of a member or an authorized representative of a member. The member is executed in accordance with section 605,0203 (1) (b), Florida Statut re that any false information submitted in a document to the Department of Statut.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)