Division of Corporations
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## FLORIDA LIMITED LIABILITY CO. LEGACYLINEFRENCHIEZ LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

JN 23 AH 9: 49

## ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY FOR

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Legacy Line Frenchiez IIC	
The mailing address and street address of the principal office of the Limited Liability	
College of the Limited Liability   College of the	No Sto
Therefore I also	2821 JUN
Miami FL 33196	¥.
3116 SCO	3 <b>A</b>
ARTICLE III - David	9
ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (The Limitea Liability with an active Florida registration.)	9
16261 Sw 95th are	
Migmi FL 33196	_
Michael Posada	-
ARTICLE IV	
The name and title of each person authorized to manage and control the Limited	
Michael Posada (AMBR)	
	_
	-
	_
	-

## Required Signatures:

Signature of a manhe er 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.S.

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 : s provided for

gent's Signature (REQUIRED)