L21000355108

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



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CORPORATE ACCESS, ___

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

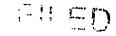
P.O. Box 37066 (32315-7066) - (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

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	CERTIFIED COPY					
XX	РНОТОСОРУ					
	CUS					
XX	FILING	LLC				
1.	1. A & D RE HOLDING, LLC					
	(CORPORATE NAME AND DOCUME	ENT #)				
2.						
	(CORPORATE NAME AND DOCUME	ENT #)		-	<u>-</u>	
3.						
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6.						
	(CORPORATE NAME AND DOCUME	NT #)			-	
SPECIA INSTRU	L CTIONS:					

COVER LETTER

TO:	New Filing Section Division of Corporations			
SUBJEC	A&D RE Holdings, LLC			
		ne of Limited Liab	ility Company	
The encl	osed Articles of Organization and	fee(s) are submitte	ed for filing.	
Please re	eturn all correspondence concerning	g this matter to the	following:	
	Damaris Pereira			
		Name o	of Person	
	Pereira Law, P.A.			
		Firm/C	ompany	
	6500 Cow Pen Road, Suite 204	ļ		
		Ado	lress	
	Miami Lakes, FL 33014			
	dpereira@pereiralawpa.com	City/State a	nd Zip Code	
		be used for future	annual report notificat	ion)
For further	information concerning this matte	r. please call:		
	Damaris Pereira	305 _at (821-5122	
	Name of Person) Daytime Telephon	
Enclosed	is a check for the following amour	nt:		
	00 Filing Fee	g Fee & \$\Boxed{1}\$1: ntus Certif	55.00 Filing Fee & fied Copy nal copy is enclosed)	☐S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Street Tallahassee, FL 3230.	issee et. Suite 810



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

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SECRETALLY OF STATE
TALLAMASSEE, FL

A&D	RE	Holdings, 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:	Mailing Address:
488 NE 18 Street., Apt. 4607	488 NE 18 Street., Apt. 4607
Miami, FL 33132	Miami, FL 33132

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:

David Vazquez		
	Name	
488 NE 18 Street., A	pt. 4607	
Florida street addres	s (P.O. Box <u>NOT</u> ac	cceptable)
Miami	FL	33132
City	State	Zip

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	David Vazquez 488 NE 18 Street, Apt. 4607 Miami, FL 33132
MGR	Adrian English 488 NE 18 Street., Apt. 4607 Miami, FL 33132
	5 5 5 F
	# 3: 20 E.E. FL
an effective date is listed, the date must be set date of filing.) ote: If the date inserted in this block does not be document's effective date on the Department.	pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed tof State's records.
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	DEQUI
I his document is execu I am aware that any fals	nember or an authorized representative of a member. atted in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State are felony as provided for in s.817.155, F.S.
David Vazquez	
	Typed or printed name of signer

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)