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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

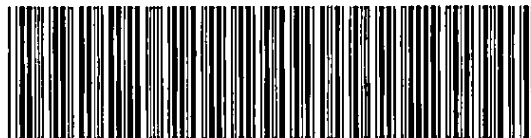
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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1511 and 1513 Duplex, LLC,  
Articles of Organization

BY THESE ARTICLES OF ORGANIZATION the undersigned Manager forms a Limited Liability Company for profit under Florida law.


1. NAME. The name of this Limited Liability Company is 1511 and 1513 Duplex, LLC.

2. REGISTERED AGENT, OFFICE AND SIGNATURE. The initial registered agent for this Limited Liability Company is Maximiliano R. Garcia and the initial registered office is located at 3066 Northwest 15 Street, Miami, FL 33125.

CONSENT OF REGISTERED AGENT

HAVING BEEN NAMED as a registered agent for this Limited Liability Company at the registered office designated in the foregoing articles of this Limited Liability Company, the undersigned accepts the designation.

*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 as registered agent and agree to act in this capacity. I further agree to comply with the provision of all statutes relating to the property and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent as provided for in Chapter 605, F.S.*

  
Maximiliano R. Garcia, Registered Agent

3. PRINCIPAL AND MAILING ADDRESS. The Principal address of the Limited Liability Company is: 3066 Northwest 15 Street, Miami, FL 33125.

4. MANAGER(S) OR MANAGING MEMBER(S). The name and street address of each Manager/Managing Member(s):

Maximiliano R. Garcia  
Manager-Member  
3066 Northwest 15 Street, Miami, FL 33125

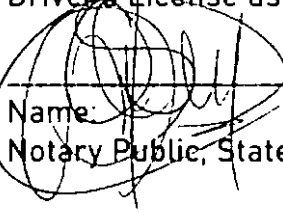
5. REQUIRED LIMITED LIABILITY FORMATION REPRESENTATIVE. The name and street address of the representative is Maximiliano R. Garcia of 3066 Northwest 15 Street, Miami, FL 33125.

Dated on the September 9, 2021.

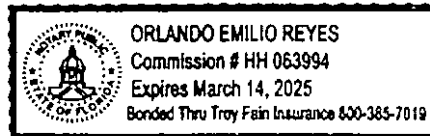
  
Maximiliano R. Garcia

STATE OF FLORIDA  
COUNTY OF MIAMI DADE

The foregoing was acknowledged before me by physical presence this September 9, 2021 by Maximiliano R. Garcia who is personally known to me or who provided Florida Driver's License as sufficient proof of identification.

  
Name: \_\_\_\_\_  
Notary Public, State of Florida

My Commission Expires:



*This document is executed in accordance with §605.0203(1)(b) Florida Statute. 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 §817.15, F.S.*

2021 SEP 15 PM 9:01  
COUNTY OF MIAMI DADE

Law Office  
Of  
Orlando E. Reyes  
Attorney at Law  
14311 SW 34 Street  
Miami, Florida 33175



*Orlando E. Reyes,*  
*Attorney at Law*

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Fax:(305) 647-2877  
E Mail: Reyatty@aol.com

September 14, 2021  
State of Florida  
Division of Corporations  
RE: LLC formation

Page 1 of 2

Gentlemen:

Our office is filing the executed Articles of Organization for the following LLC's:

1511 and 1513 Duplex. LLC  
2432 and 2425, LLC  
2440 and 2450 Duplex. LLC  
3069 and 3071 Duplex. LLC  
3065 and 3067 Duplex. LLC  
1201 SW 119<sup>th</sup> LLC  
161 and 167, LLC  
11950 SFH, LLC  
3055 SFH. LLC  
3550 and 9<sup>th</sup>, LLC.  
911 SFH. LLC  
31<sup>st</sup> and 132 SFH, LLC  
19045 and 119 SFH, LLC

Also enclosed is our firm's check for \$1,625.00. Covering the \$125 filing fee for each of the 13 LLCs.

Feel free to call should any questions

Cordially,

Orlando E Reyes, Esq.

Enc

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