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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

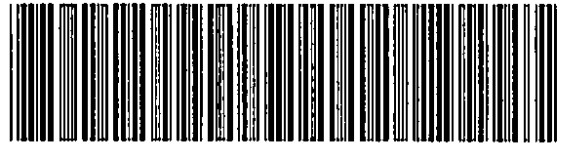
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. O'KEEFE

MAY 10 2022

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: 2950 CRUZ PROPERTIES, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kristine M. Chapman, Esquire

Name of Person

Kristine M. Chapman, PA

Firm/Company

2500 N. Military Trail, Ste. 240

Address

Boca Raton, FL 33431

City/State and Zip Code

kc@kristinechapmanlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristine M. Chapman

561

989-8885

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$160.00 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 Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION**  
**for**  
**2950 CRUZ PROPERTIES, LLC**

**ARTICLE I**  
**NAME**

The name of this Florida Limited Liability Company is 2950 Cruz Properties, LLC.

**ARTICLE II**  
**PRINCIPAL OFFICE**

The principal place of business of the Limited Liability Company and its mailing address is 4011 SW 132<sup>nd</sup> Avenue, Miami, FL 33175.

**ARTICLE III**  
**REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the registered agent is as follows:

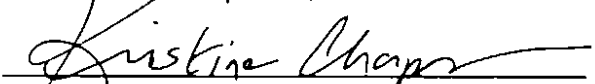
Kristine M. Chapman, PA  
2500 N. Military Trail, Suite 240  
Boca Raton, Florida 33431

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated above, 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.

Kristine M. Chapman, PA.

  
\_\_\_\_\_  
Kristine M. Chapman, Esquire  
(Registered Agent)

**ARTICLE IV**  
**MANAGEMENT AND CONTROL**

This is a member-managed Limited Liability Company, and the member authorized to manage and control the Limited Liability Company is as follows:

Antonio R. Cruz, Authorized Member (AMBR)  
4011 SW 132<sup>nd</sup> Avenue  
Miami, FL 33175

  
\_\_\_\_\_  
Kristine M. Chapman, Esquire

As the authorized representative of member, Antonio R. Cruz, for the purpose of forming this Limited Liability Company. This document is executed in accordance with Section 605.0203 (1) (b), F.S. 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, F.S.

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TALLAHASSEE, FLORIDA