PH 9:

ote: Please print 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.

(((H22000191466 3)))



H220001914663ABC+

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : PAUL SALVER, P.A.

Account Number : 120020000087

Phone

: (954)389-1333

Fax Number

: (954)389-1397

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:					
CINALL MUUI COO.				 	

## FLORIDA LIMITED LIABILITY CO.

## Invercoba Real Estate Miami LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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Corporate Filing Menu

Help

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## **COVER LETTER**

то:	New Filing Sect Division of Cor						
2.12.22		teal Estate Miami LLC					
SUBJEC	CT:		imited	Liability Company	<del></del>		
The encl	osed Articles of	Organization and fee(s)	are sub	mitted for filing.			
Picase re	turn all correspo	ndence concerning this	matter t	o the following:			
	Daniella San	tana					
			Na Na	ime of Person			
	Salver & Coo	ok LLP					
			Fi	rm/Company			
	2721 Executi	ve Park Drive, Suite 4					
				Address		<u></u>	
	Weston,Flori	da 33331					
			City/S	tate and Zip Code		<del></del> _	
	d.santana@ps		ed for f	uture annual report notificat			
Por fuethe		ncerning this matter, ple			,		
10.70.00	Daniella Sant		954	3891333			
	Nam	e of Person	Area C	Code Daytime Telephon	e Number		
Enclose	d is a check for t	he following amount:					
	.00 Filing Fee	□\$130.00 Filing Fee Certificate of Status		□\$155.00 Filing Fee & Certified Copy Iditional copy is enclosed)	□\$160.00 F Certificate of Certified Co (additional cop	f Status & py	
	New F Divisio P.O. B	eg Address iling Section on of Corporations lox 6327 assee, FL 32314		Street Address New Piling Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, PL 3236	assee et, Suite 810	Ü '-E KRD/O FRANCHIS DIVISION OF CORF TALLAHASSEE.	1 - NOC 2202

(((H22000191466 3)))

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES	A ORGANIZATION FOR		MALITICANIANI .		
ARTICLE I - Name;					
The name of the Limited Liabi	lity Company is:				
Invercoba Real Est	ste Miami I I C				
	ntain the words "Limited	Liability Company, "I	L.C.," or "LLC.")	<del></del>	
•			, ,		
ARTICLE II - Address:	- 4.1 <b>6</b>	CCFab. 7 imirad f	ishilim Campanyin		
The mailing address and street	address of the principal o	mes of me Dimica D	latinity Company is:		
<u>Princi</u>	ipal Office Address:		Mailing Addre	<u>£5</u> :	
951 NJ- 1-+ A II-	is 100A	951 N	1st Ave,Unit 1904		
851 Ne 1st Ave,Un Miami Fl 33132	11 1904		F1 33 132		
2337422					
ARTICLE III - Registered A (The Limited Liability Compar	gent, Registered Office,	& Registered Agent	's Signature: ou must decimate en indi	ividual or	
another business entity with a	ny cannot serve as na owi n active Florida registratio	ur) i Velisieien vilener 1.	ng mmr gwifnere en ma	IAICONT OF	
		,			
The name and the Florida street	et address of the registere	d agent are:			
	Salver & Cook LLP				
	Bay or the Cook Day	Name	<del></del>		
	2721 Executive Park				
	Florida street addres	is (P.O. Box <u>NOT</u> acc	ертвоте)		
	Weston	Florida	33331		
	City	State	Zip		
Having been named as registere place designated in this certifica	d agent and to accept ser-	ice of process for the	ibove stated limited liabil. Facus and accuse to act is	ity company at the	
place designated in this certifica further agree to comply with the	ne, i nerecy accept the type nervisions of all statutes t	clating to the proper	rageni una agree io uti i ma complete performanci	e of my duties, and I	
am familiar with and accept the	abligations of my position	as registered agent as	provided for in Chapter	605, F.S	
•	\'\'	· .			
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				716 736	. i.
				SH	38

ARTICLE IV-

(((H22000191466 3)))

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
2	Manuel Coto	
MGR	851 Ne 1st Ave, Unit 1904	<u> </u>
	Mjagni Pl 33132	
		_
		<del>-</del>
		_
		_
(Use attachment if necessary)		
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