

To:

Page: 4 of 6

2022-06-07 10:35:07 EDT

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From: Melissa Soy

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : RASCO KLOCK PEREZ & NIETO, P.L.  
Account Number : 104076000124  
Phone : (305)476-7100  
Fax Number : (305)476-7102

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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11:11

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

Email Address: msoy@rascoklock.com

FLORIDA LIMITED LIABILITY CO.  
Junic VI, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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CORPORATIONS  
COMMERCIAL  
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**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I. - Name**

The name of the Limited Liability Company is:

**JUNIC VI, LLC**

**ARTICLE II. - Address**

The mailing address and street address of the principal office of the Limited Liability Company is:

9771 SW 16th Terrace  
Miami, Florida 33165

**ARTICLE III. - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

**Miami Corporate Systems, LLC**  
2555 Ponce de Leon Boulevard,  
Suite 600  
Coral Gables, Florida 33134

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, Florida Statutes.

**REGISTERED AGENT:**

Miami Corporate Systems, LLC,  
a Florida limited liability company

By \_\_\_\_\_

Ramon E. Rasco, Manager

**ARTICLE IV. – Management:**

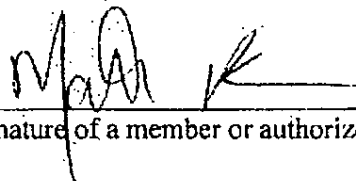
The Limited Liability Company is to be managed and controlled by one or more managers. The name and address of the person who shall serve as initial manager are:

**Martha Bello-Rodriguez**  
9771 SW 16th Terrace  
Miami, Florida 33165

**ARTICLE V. – Indemnification:**

The Company shall indemnify any present or former manager, officer or director and shall advance expenses on behalf of any such manager, officer or director, in each case, to the fullest extent now or hereafter permitted by law.

2022 JUN 10 AM 10:05  
STATE OF FLORIDA  
ALLAH SE L. FLORIDA

  
\_\_\_\_\_  
Signature of a member or 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.)*