13053284774



Note: 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.

(((H22000201278 3)))



H220002012783ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	Division of Co Fax Number	: (850)617-6381
From:		
	Account Name	: EXPRESS CORPORATE FILING SERVICE INC.
	Account Number	: 120000000146
	Phone	: (305)444-4994
	Fax Number	: (305)328-4774

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

Email Address:



Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

1/1

.

To:

.

N-9 PH 2:

÷

Ē

## AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

14050 SW 44 Street, 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:

. . . . . . .

Mailing Address:	
3280 SW 2 Street	
Miami, FL 33144	

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:

Mancebo Law, P.A.						
	Name					
250 Catalonia Aven	ue, Suite 302					
Florida street addres	s (P.O. Box <u>NOT</u> a	cceptable)				
Coral Gables	FL	33134				
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 stateges relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position to registered agent as provided for in Chapter 605, F.S..

red Agent's Signature (REQUIRED) (CONTINUED)

2022-06-09 15:19:37 GMT

-

.

ς.

5

ARTICLE IV-

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

MGR	Felix Marquez	
	8280 SW 2 Street	
	Miami, FL 33144	
Use attachment if necessary)		
V: Effective date, if other than the date	- C C I	(ODCPICIAL & C)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Felix Marquez	`:
Typed or printed name of signee	7.10
<u>Piling Fress</u> \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) ;	FILED 22 JUN -9 PH R: 35 ECRETARY OF STATE ILLAHASSEE, FLORIDA