

# L220000336404

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

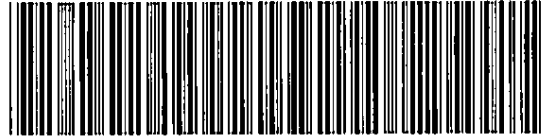
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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S. CHATHAM

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JUL 29 2022  
CLERK OF SUPERIOR COURT

2022 JUL 29 PM 2:29

22 JUL 29 PM 10

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

MULTI LIBRI 9155 LLC

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

Art of Inc. File \_\_\_\_\_  
LTD Partnership File \_\_\_\_\_  
Foreign Corp. File \_\_\_\_\_  
L.C. File \_\_\_\_\_  
Fictitious Name File \_\_\_\_\_  
Trade/Service Mark \_\_\_\_\_  
Merger File \_\_\_\_\_  
Art. of Amend. File \_\_\_\_\_  
RA Resignation \_\_\_\_\_  
Dissolution / Withdrawal \_\_\_\_\_  
Annual Report / Reinstatement \_\_\_\_\_  
Cert. Copy \_\_\_\_\_  
Photo Copy \_\_\_\_\_  
Certificate of Good Standing \_\_\_\_\_  
Certificate of Status \_\_\_\_\_  
Certificate of Fictitious Name \_\_\_\_\_  
Corp Record Search \_\_\_\_\_  
Officer Search \_\_\_\_\_  
Fictitious Search \_\_\_\_\_  
Fictitious Owner Search \_\_\_\_\_  
Vehicle Search \_\_\_\_\_  
Driving Record \_\_\_\_\_  
UCC 1 or 3 File \_\_\_\_\_  
UCC 11 Search \_\_\_\_\_  
UCC 11 Retrieval \_\_\_\_\_

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**ARTICLES OF ORGANIZATION  
OF  
MULTI LIBRI 9155 LLC**

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**ARTICLE 1  
NAME**

The name of the limited liability company is MULTI LIBRI 9155 LLC.

**ARTICLE 2  
ADDRESS**

The mailing address and street address of the principal office of the limited liability company are:

Principal Office Address: 3730 Southwest 123 Court  
Miami, Florida 33175

Mailing Address: P. O. Box 651069  
Miami, Florida 33265-1069

**ARTICLE III  
REGISTERED AGENT**

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

Roxana I. Nasco, P.A.  
2600 So. Douglas Road, Suite 913  
Coral Gables, Florida 33134

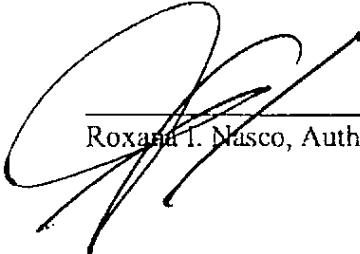
**ARTICLE IV  
MANAGEMENT**

The name and address of the person authorized to manage and control the limited liability company is:

Title:	Manager	Name and address:	SONOFEZ PROPERTY MANAGEMENT LLC P. O. Box 651069 Miami, Florida 33265
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22 JUL 29 11:10:55

These Articles of Organization 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 Section 817.155, Florida Statutes.

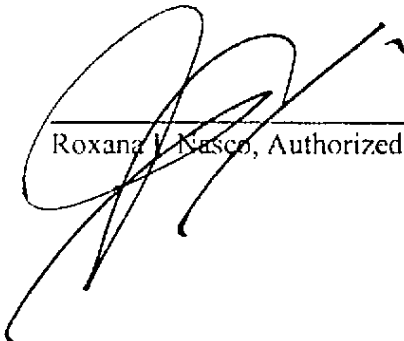


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Roxana I. Nasco, Authorized Agent

#### **ACCEPTANCE OF APPOINTMENT BY REGISTERED AGENT**

Having been named as registered agent and to accept service of process for the above 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 property 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.



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Roxana I. Nasco, Authorized Agent

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