To:

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

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FLORIDA LIMITED LIABILITY CO. THREE CRAVES LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

THREE CRAVES LLC	
(Must contain the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office o	f the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3800 S OCEAN DR	
APT 1619	SAME
HOLLYWOOD, FL 33019	
1100001 110000110	
ARTICLE III - Registered Agent, Registered Office, & Reg The Limited Liability Company cannot serve as its own Regis	
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Registanother business entity with an active Florida registration.) The name and the Florida street address of the registered agent	tered Agent. You must designate an individual or

Name

3800 S OCEAN DR APT 1619

Florida street address (P.O. Box NOT acceptable)

HOLLYWOOD 33019 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 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.

> (%p 12,2072 (5:25 £27) Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

Lemmer

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	ALEJANDRO VALLARINO 3800 S OCEAN DR APT 1619
	HOLLYWOOD, FL 33019
-	
ffective date is listed, the date must be :	ate of filing:
LE V: Effective date, if other than the da ffective date is listed, the date must be seef filing.)	specific and cannot be more than five business days prior to or 90 timest the applicable statutory filing requirements, this date will not
LE V: Effective date, if other than the date fective date is listed, the date must be set filling.) If the date inserted in this block does no	specific and cannot be more than five business days prior to or 90 t meet the applicable statutory filing requirements, this date will not not of State's records.
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