Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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FLORIDA LIMITED LIABILITY CO. Certificate of Status Certified.Copy Page Countle 21 90 Estimated Charge 4 VILE-PRESIDE..T

Electronic Filing Menu

Corporate Filing Menu

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Help

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ARTICLES OF	ORGANIZATION	FOR FLORIDA LIN	INTED LIABILITY	COMPANY
ARTICLE I - Name:				
The name of the Limited Liability	Company is:			
•			1	
2997 SW 19 Terrace,	LLC			
		nited Liability Com	pany, "L.L.C.," or	"LLC.")
ARTICLE II - Address:				
The mailing address and street ad-	dress of the princ	ipal office of the Li	mited Liability Co	ompany is:
Principa	Principal Office Address:			dalling Address:
6050 SW 45 Street			6050 SW 45 Str	ect
Miami, Florida 33155			Miami, Florida 3	13155
ARTICLE III - Registered Ager (The Limited Liability Company of another business entity with an ac	annot serve as it:	s own Registered A		
The name and the Florida street as	ldress of the regi	stered agent are:		
	Caleb Rohas			
		Name		
	5050 SW 45 Str	reet		
	Florida street a	ddress (P.O. Box 🐧	OT acceptable)	
•	Mianni,	Florida	33	155
	City	State	Zi;	3

Having been named us 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 froper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent its provided for in Chapter 605, F.S.

20 W Registered Agent's Signature (REQUIRED)

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Atted Copy 10 (CONTINUED)

22 SEP 22 PH 12: 35

ARTICLE IV-

	R* = Authorized N	Aember	Name h						
-MGR AMI	" = Manager BR		Calch Roins						
		•	6050 SW 45 S Miami, Florid						
<u>AMB</u>	<u>R</u>		Keren Roins 6050 SW 45 S						
			Miami, Florid	u 331 5 5					
									
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