To:

1022. 124000 Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H22000359832 3)))



H220003598323ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 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.

C41	Address:			
rmaii	ADDITESS:			

FLORIDA LIMITED LIABILITY CO. 2775 EAST 10TH PROPERTIES, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help



•		
- A ひつりんぜ むじょうはい へいしょう A りじょく	CHARLETON DE ANTON I BATTIEN I	I 1 4 የጎመ የመሚፈረዊ እስል ብርነ እንዲያም ነገኛ
AKIICILLIOUT OKUUNKA	ATION FOR FLORIDA LIMITED I	LIABILITI CUMPAN

ARTICLE I - Name:	A	RT	TICL	ÆI	i – i	Na	me:
-------------------	---	----	------	----	-------	----	-----

The name of the Limited Liability Company is:

2775 EAST 10TH PROPERTIES, 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:

Principal Office Address:	maning Address:
14060 NW 82ND AVE	
MIAMI, FL 33016	SAME

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:

CHRISTIAN NAVA	RRO	
	Name	
14060 NW 82ND A	VE	
Florida street addres	s (P.O. Box <u>NOT</u> ac	cceptable)
MIAMI	FL	33016
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.

> Oct 19, 2022 Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

"AMBR" = Authorized Member	Name and Address:
·	
'MGR" = Manager	
MGR	<u>CHRISTIAN NAVARRO</u>
	14060 NW 82ND AVE
	MIAMI, FL 33016
N/CD	T THE COLUMN
MGR	AILEMA GOMEZ 14060 NW 82ND AVE
	MIAMI. FL 33016
Use attachment if necessary)	
ctive date is listed, the date must be f filing.) the date inserted in this block does n	date of filing:
ctive date is listed, the date must be filling.) the date inserted in this block does need's effective date on the Department's effective date on the Departm	e specific and cannot be more than five business days prior to or 90 days at not meet the applicable statutory filing requirements, this date will not be liste
ctive date is listed, the date must be filling.) the date inserted in this block does neut's effective date on the Departm VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90 days at not meet the applicable statutory filing requirements, this date will not be liste
ctive date is listed, the date must be filling.) the date inserted in this block does need's effective date on the Departm EVI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90 days at not meet the applicable statutory filing requirements, this date will not be listed tent of State's records.
ctive date is listed, the date must be filing.) the date inserted in this block does need's effective date on the Departm EVI: Other provisions, if any. REQUIRED SIGNATURE:	e specific and cannot be more than five business days prior to or 90 days at not meet the applicable statutory filing requirements, this date will not be listed tent of State's records.
ctive date is listed, the date must be filling.) the date inserted in this block does neut's effective date on the Departm EVI: Other provisions, if any. REOUIRED SIGNATURE:	e specific and cannot be more than five business days prior to or 90 days at not meet the applicable statutory filing requirements, this date will not be listed tent of State's records.
ctive date is listed, the date must be filling.) the date inserted in this block does neut's effective date on the Departm EVI: Other provisions, if any. REOURED SIGNATURE:	e specific and cannot be more than five business days prior to or 90 days a specific and cannot be more than five business days prior to or 90 days a specific and cannot be listed that the applicable statutory filing requirements, this date will not be listed that of State's records. Oct
ctive date is listed, the date must be filling.) the date inserted in this block does neut's effective date on the Departm VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a This document is ex	e specific and cannot be more than five business days prior to or 90 days a specific and cannot be more than five business days prior to or 90 days a specific and cannot be listed that the applicable statutory filing requirements, this date will not be listed that of State's records. Oct
ctive date is listed, the date must be filling.) the date inserted in this block does not neut's effective date on the Departmet VI: Other provisions, if any. REOURED SIGNATURE: Signature of a This document is ex I am aware that any	oct meet the applicable statutory filing requirements, this date will not be listed tent of State's records. Oct a member or an authorized representative of a member. Recuted in accordance with section 605.0203 (1) (b), Florida Statutes. If also information submitted in a document to the Department of State.
ctive date is listed, the date must be filling.) the date inserted in this block does neut's effective date on the Departm divisions, if any. REOURED SIGNATURE: Signature of a This document is ex I am aware that any	oct meet the applicable statutory filing requirements, this date will not be listed tent of State's records. Oct a member or an authorized representative of a member. Recuted in accordance with section 605.0203 (1) (b), Florida Statutes. Take information submitted in a document to the Department of State.
ctive date is listed, the date must be filling.) the date inserted in this block does neut's effective date on the Departm divisions, if any. REOURED SIGNATURE: Signature of a This document is ex I am aware that any	oct meet the applicable statutory filing requirements, this date will not be listed tent of State's records. Oct a member or an authorized representative of a member. Recuted in accordance with section 605.0203 (1) (b), Florida Statutes. False information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S.
ctive date is listed, the date must be filling.) the date inserted in this block does neut's effective date on the Departm divisions, if any. REOURED SIGNATURE: Signature of a This document is ex I am aware that any constitutes a third de	Oct member or an authorized representative of a member. secuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S.
ctive date is listed, the date must be filling.) the date inserted in this block does neut's effective date on the Departmet. EVI: Other provisions, if any. REOURED SIGNATURE: Signature of a This document is ex I am aware that any constitutes a third de	oct meet the applicable statutory filing requirements, this date will not be listed tent of State's records. Oct a member or an authorized representative of a member. Recuted in accordance with section 605.0203 (1) (b), Florida Statutes. If also information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S. NAVARRO Typed or printed name of signee
ctive date is listed, the date must be filling.) the date inserted in this block does neut's effective date on the Departm divisions, if any. REOURED SIGNATURE: Signature of a This document is ex I am aware that any constitutes a third de CHRISTIAN	Oct a member or an authorized representative of a member. Recuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S. NAVARRO Typed or printed name of signee Filing Fees:
ctive date is listed, the date must be filling.) the date inserted in this block does neut's effective date on the Departm divisions, if any. REOURED SIGNATURE: Signature of a This document is ex I am aware that any constitutes a third de CHRISTIAN \$125.00 Filling Fee for Articles of	oct meet the applicable statutory filing requirements, this date will not be listed tent of State's records. Oct A member or an authorized representative of a member. Recuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S. NAVARRO Typed or printed name of signce Filing Fees: Organization and Designation of Registered Agent
ctive date is listed, the date must be filing.) the date inserted in this block does neut's effective date on the Departm VI: Other provisions, if any. REOURED SIGNATURE: Signature of a This document is ex I am aware that any constitutes a third de CHRISTIAN	Oct a member or an authorized representative of a member. excuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S. NAVARRO Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent