3/2/23, 11:54 AM

Division of Corporations

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## FLORIDA LIMITED LIABILITY CO. SANTOS 209, LLC.

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

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Help

## AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ANTICOCO ON ON INCIDENTIAL PROPERTY.	IDALIMI (ED LIABULITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
SANTOS 209, LLC.	
(Must contain the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ADTICLE II Address	·
ARTICLE II - Address:	effects there are the transfer
The mailing address and street address of the principal office of	or the Limited Chapitity Company is:
Principal Office Address:	Mailing Address:
2810 SW 104TH CT	2810 SW 104TH CT.
MIAMI, FL. 33165	MIAMI, FL. 33165
ARTICLE III - Registered Agent, Registered Office, & Re	gistered Agent's Signature:
(The Limited Liability Company cannot serve as its own Regis another business entity with an active Florida registration.)	stered Agent. You must designate an individual or
another business entity with all active Plottess registration.)	
The name and the Florida street address of the registered agent	t are:
BEN FINANCIAL SERVI	CES, INC.

Name

10500 NW 26TH STREET, STE. A-101

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

DORAL FL 33172

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:		Name and Address:
	athorized Member	
"MGR" = Ma	nager	
MGR		ROBERTO SANTOS
<u> </u>		2810 SW 104TH CT.
		MIAMI, FL, 33165
	<del></del>	
/like attachm	ent if necessary)	
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