

**L23000270715**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : NRAI SERVICES, LLC  
Account Number : I20080000104  
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DIVISION OF CORPORATIONS  
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**FLORIDA LIMITED LIABILITY CO.  
MIAMI LAKES GEN, LLC**

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

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

Miami Lakes Gen, 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:**5800 N.W. 171st Street  
Miami, Florida 33015**Mailing Address:**5800 N.W. 171st Street  
Miami, Florida 33015**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:

NRAI Services, Inc.

Name

1200 South Pine Island RoadFlorida street address (P.O. Box ~~NOT~~ acceptable)PlantationFlorida33324

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.

NRAI Services, Inc.

By: [Signature]

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:****Name and Address:**

"AMBR" = Authorized Member

"MGR" = Manager

See AttachmentSee Attachment

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.**ARTICLE VI:** Other provisions, if any.\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**REQUIRED SIGNATURE:**

/s/John Rhodes

**Signature of a member or an authorized representative of a member.**This document 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 s.817.155, F.S.John Rhodes, Vice President

Typed or printed name of signee

**Filing Fees:****\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent****\$ 30.00 Certified Copy (Optional)****\$ 5.00 Certificate of Status (Optional)**

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ATTACHMENT  
TO  
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
FOR  
MIAMI LAKES GEN, LLC

**ARTICLE IV –**

The name and address of each person authorized to manage and control the Limited Liability Company:

<u><b>Title:</b></u>	<u><b>Name and Address:</b></u>
President	Frank Pena 6200 N.W. 167 <sup>th</sup> Street Miami Lakes, Florida 33014
Executive Vice President	Barry Frieder 5800 N.W. 171 <sup>st</sup> Street Miami, Florida 33015
Executive Vice President	Mark Manzo 5800 N.W. 171 <sup>st</sup> Street Miami, Florida 33015
Chief Financial Officer	Hamed Parhizar 5800 N.W. 171 <sup>st</sup> Street Miami, Florida 33015
Vice President/Assistant Secretary	John Rhodes 5800 N.W. 171 <sup>st</sup> Street Miami, Florida 33015
Treasurer/Secretary	David Yusko 5800 N.W. 171 <sup>st</sup> Street Miami, Florida 33015
Assistant Secretary	Evelyn Munoz 5800 N.W. 171 <sup>st</sup> Street Miami, Florida 33015

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