

Florida Department of State  
Division of Corporations  
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To:

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Fax Number : (850)617-6381

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### FLORIDA LIMITED LIABILITY CO.

4844 Bridge Road LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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June 27, 2023

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RASI

SUBJECT: 4844 BRIDGE ROAD LLC  
REF: W23000089420

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Landscape format is not acceptable, please resend portrait format with fax cover sheets.

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Dil Sultana  
Regulatory Specialist IIFAX Aud. #: H23000226035  
Letter Number: 123A00014472

6/27/2023 11:28:04 AM  
Division of Corporations  
State of Florida

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

The name of the Limited Liability Company is:

4844 Bridge Road 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:**14122 SW 51St Court  
Miramar, FL 33027**Mailing Address:**14122 SW 51St Court  
Miramar, FL 33027**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:

Dr. Giselle Deiros

Name

14122 SW 51St Court

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

MiramarFL33027

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 603, F.S.*

  
Registered Agent's Signature (REQUIRED)**(CONTINUED)**

#### ARTICLE IV.

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

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"AMBR" = Authorized Member  
"MOR" = Member

**Name and Address:**

Ramiro Dalcoa  
18210 Grand Central Parkway  
Jamaica Estates, NY 11432

Hanetta Gomez  
11220 Grand Concourse Parkway  
Jamaica Estates, NY 11432

(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.**

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**Real Estate Rental**

**REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member.  
This document is executed in accordance with section 603.0203 (1) (b), Florida Statute.  
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.417.153, P.B.

THE CHINESE IN SINGAPORE

## Willie Tamm

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