

L23000310460

Florida Department of State
Division of Corporations
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Division of Corporations
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FLORIDA LIMITED LIABILITY CO.
1002 NE 15th ST LLC

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|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
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June 27, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RASI

SUBJECT: 1002 NE 15TH ST LLC
REF: W23000089416

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 sheet.

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Dil Sultana
Regulatory Specialist IIFAX Aud. #: H23000226025
Letter Number: 323A00014471

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FLORIDA DEPARTMENT OF STATE
JUN 28 AM 8:43
TALLAHASSEE, FLORIDA

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

The name of the Limited Liability Company is:

1002 NE 15th ST 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
Miamar, 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 CourtFlorida 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 605, 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:

Title:

"AMBR" = Authorized Member

"MOR" = Manager

Name and Address:

Ramiro Deiros
18220 Grand Central Parkway
Jamaica Estates, NY 11432

Hanette Gomez
18220 Grand Central 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.

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 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.817.133, F.S.

Ramiro Deiros
Typed or printed name of signer

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)