123000313807

(Req	uestor's Name)	
(Addı	ess)	
(Addı	ress)	
(City)	State/Zip/Phone	-
(City/	State/Zip/Filoni	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nar	ne)
- (Doc	ument Number)	
(200)		
O ME LO	O 127	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
	_	

Office Use Only



000406661740

97/05/23--01005--016 **125.00

2023 JUL -5 AM 11: 52

RECEIVED



CORPORATE When ACCESS, _____

When you need ACCESS to the world

INC.

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

			•	VALN IIV		
		PICK U	P:	MISTY 7/5		
		CERTIFIED COPY			 	
	XX	РНОТОСОРУ			 	
		CUS			 	
	XX	FILING	LLC			
1.		MARE HOLLYWOOD LL (CORPORATE NAME AND DOCUMEN			 	
2.		(CORPORATE NAME AND DOCUMEN	T #)			
3.		(CORPORATE NAME AND DOCUMEN	T #)		 -	
4.		(CORPORATE NAME AND DOCUMEN	T #)		 	
5.		(CORPORATE NAME AND DOCUMEN	T #)		 	
6.		(CORPORATE NAME AND DOCUMEN	 T #)			
	ECIA TRU		-		 	

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabil	ity Company is:			
	MARE HO	LLYWOOD LLC		
(Must cor	tain the words "Limited	Liability Company,	L.L.C.," or "L.LC.")	
ARTICLE II - Address: The mailing address and street	address of the principal o	office of the Limited	Liability Company is:	
Princi	pal Office Address:		Mailing Ac	ldress:
4325 Bougainvilla I	Orive	4325	Bougainvilla Drive	
Lauderdale by the Sea, Florida 33308			Lauderdale by the Sea, Florida 33308	
				
another business entity with an The name and the Florida street	address of the registered	d agent are: D ASSOCIATES, INC Name		
	2863 EXECXUTIVE			
	riorida street addres	s (P.O. Box <u>NOT</u> ac	ceptable)	
	WESTON	FLORIDA	33331	
	City	State	Zip	
laving been named as registered lace designated in this certificate arther agree to comply with the p m familiar with and accept the o	v. I hereby accept the app provisions of all statutes re	ointment as registered elating to the proper of astronomy as the proper of astronomy as the proper of the proper o	l agent and agree to a ind complete perform	et in this capacity. I ance of my dutics, and I
		ACTANNITE NOT THE STATE OF THE		

(CONTINUED)

FILED

2023 JUL -5 AH 6: 52

SECRETARY OF STATE

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	RICARDO FABIAN MAMIA 4325 Bougainvilla Drive Lauderdale by the Sea, Florida 33308
MGR	CECILIA ALVAREZ 4325 Bougainvilla Drive Lauderdale by the Sea, Florida 33308
(If an effective date is listed, the date must be s the date of filing.)	pecific and cannot be more than five business days prior to or 90 days after
Note: If the date inserted in this block does not the document's effective date on the Departmen ARTICLE VI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not be listed a t of State's records.
REQUIRED SIGNATURE:	La triema
	monther or an authorized representative of a member, uled 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.

JOEL FRIEND, AUTHORIZED REPRESENTATIVE Typed or printed name of signce

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)