9/5/23, 12:14 PM

Division of Corporations

# Desiral Opartment of State

Division of Corporations **Electronic Filing Cover Sheet** 

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### FLORIDA LIMITED LIABILITY CO. INVESTORS MIAMI, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name

INVESTORS MIAMI, LLC ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address
18181 NE 31 CT
SUITE 2410
AVENTURA FLORIDA 33160

Mailing Address
18181 NE 31 CT
SUITE 2410
AVENTURA, FLORIDA 33160

ARTICLES III-Other provisions if any

ANY PURPOSE

ARTICLES IV- Register Agent, Register Office & Register Agent's Signature:) (The Liability Company cannot serve as its own Register 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:

CARLOS CHEDRAUI 18181 NE 31 CT SUITE 2410 AVENTURA, FLORIDA 33160

Having been named as register 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 register agent and agree to act in this capacity. Y further agree to comply with the provisions of all statutes relating to the proper and complete performance of any duties, and I am familiar With and accept the obligations of my position as register agent as provided for in Chapter 605 FS

Registered Agent's Signature (REQUIRED

ARTICLES V- Manager (s) or Managing Member [s] of each Manager or Managing Member is as follows:

#### Title:

CARLOS CHEDRAUI 18181 NE 31 CT SUITE 2410 AVENTURA, FLORIDA 33160

**AMBR** 

AMBR

NICOLE LIPPUNER 18181 NE 31 CT SUITE 2410 AVENTURA, FLORIDA 33160

ARTICLE VI: effective date, if other than the date filing 03/04/2021 (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 filing)

### REQUIRED SIGNATURE:

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 third degree felony as provided for in s. 817.155, F.S.

CARLOS CHEDRAUI

