## Division of Corporations Electronic Filing Cover Sheet

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Account Number : 104512000707 Phone : (305)803-2736

Fax Number

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## FLORIDA LIMITED LIABILITY CO. MIGUEL CELLERI, LLC.

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Corporate Filing Menu

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## , ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<u> </u>	MIGUE	L CELLERI, LLC	C.
(Must	contain the words "Limited Li-	ability Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and str	ect address of the principal offi	ice of the Limited	Liability Company is:
<u>Pri</u>	ncipal Office Address:		Mailing Address:
1569 NW 17TH	AVE	1569	NW 17TH AVE
# PHO1		# PH	101
# PHO1 MIAMI, FL. 331 ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & pany cannot serve as its own Re an active Florida registration.)	# PH MIA Registered Agen egistered Agent, Y	101 .MI, FL. 33125
# PHO1 MIAMI, FL. 331 ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & pany cannot serve as its own Re an active Florida registration.)	# PH MIA Registered Agen egistered Agent, Y	MI, FL. 33125
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# PHO1 MIAMI, FL. 331 ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & Dany cannot serve as its own Registration.) The an active Florida registration.) The address of the registered agent MIGUEL CELLERI  N	# PH MIA  Registered Agent  cgistered Agent  gent are:  Name	MI, FL. 33125  nt's Signature: You must designate an individual or
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Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
AMBR	MIGUEL CELLERI 1569 NW 17TH AVE APT #PHO1 MIAMI, FL, 33125	- -
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