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(((H24000060886 3)))



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	Account Number	: 120130000020
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Email Address: \_\_\_\_\_\_ corporate@esquenazi-law.com\_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.

TZ1 LLC



Audit No.: H24000069886 3

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE L Name

The name of the Limited Liability Company is:

## TZ1 LEC

#### ARTICLE II. - Address

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

520 S. Dixie Hwy, Hallandale Beach, FL 33009

#### ARTICLE III. – Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

# Corporate Solutions of South Florida, Inc

4651 Sheridan Street, Suite 355 Hollywood, FL 33021

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, we hereby accept the appointment as registered agent and agree to act in this capacity. We further agree to comply with the provisions of all statutes relating to the proper and complete performance of our duties, and we are familiar with and accept the obligations of our position as registered agent as provided for in Chapter 605. Horida Statutes,

REGISTERED AGENT:

CORPORATE SOLUTIONS OF SOUTH FLORIDA, INC.

Salomon B. Esquenazi, President

Audit No: H24000060886.3 This instrument was prepared by: Salomon B. Esquenazi, P.A. 4651 Sheridan Street, Suite 355 Hollywood, FL 33021 (954) 989-4995



#### From: MARIA LEDESMA Fax, 19549894991 To.

Fak: (850) 617-6381

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### ARTICLE IV. - Management:

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The names and addresses of the managers who are to serve as initial managers are:

Romano Metta, Benjamin
21205 NE 37 Ave. #1802,
Aventura, FL 33180
Jalife, Samuel
3000 Island Blvd. #3002,
$\wedge$ (Aventura FL, 33160
Materia
1 mo.
Signature of a member or <u>authorized representative of a member</u> .
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.
constitutes a time degree reiony as provided for in \$.817.155, r.s.
J
4889-4354-6277, v. 1

FEB IL PH 3: 2 RETAILS OF STATE 

Audit No.: H24000060886 3 This instrument was prepared by: Salomon B. Esquenazi, P.A. 4651 Sheridan Street, Suite 355 Hollwood, FL 33021