Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

-..

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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Phone : (305)552-5973
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO. KL 502, LLC

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Line:	COMPANY
The name of the Limited Liability Company is	S:
ARTICLE II - Address: The mailing address and street address of the Company is:	principal office of the Limits IV
8912 SW 80th St. Miami, FL 33173	and dimitted Liability
ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the Company cannot serve as its own Registered Agent. You must design with an active Florida registration.)	fice: Tegistered agent are: (The Limites! Liability are on individual or another business entity
8912 SW 85th St	5
- 15 33173	25 27 27 27 27 27 27 27 27 27 27 27 27 27
ARTICLE IV The name and title of each person authorized to Liability Company: (MGR or AMBR)	manage and control the Limited
Elena Rawback MGR Emilio Grenet MGR	STATE TO STATE

Required Signatures:

3052201440

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated h mein are true. 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.

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 cortificate, 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 tamiliar with and accept the obligations of my position as registered agent as provided for

Registered Agent's Signature (REQUIRED)