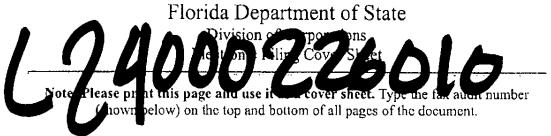
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Division of Corporations



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FLORIDA LIMITED LIABILITY CO.

U-BELLE 1415 LLC

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03
\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

U-E	BELLE 1415 LLC		
(Must end with the words 'Limited	Liability Compar	y, "L.L.C.," or "LLC.")	_
ARTICLE II - Address: The mailing address and street address of the principal of	ffice of the Limite	d Liability Company is:	
Principal Office Address:		Mailing Address:	
20 Island Ave		14414 SW 109th Street	
Apt #1415		Mlami, FL. 33186	
Miami Beach, FL 33139			_
The name and the Florida street address of the registered	lga Ugartechea	···	
	Name		
	SW 109th Stree	· · · · · · · · · · · · · · · · · · ·	
Florida street address	s (P.O. Box <u>NOT</u>	acceptable)	
Miami	FL.	33186	
City	State	Zip	
Having been named as registered agent and to accept servious place designated in this certificate, I hereby accept the appoint further agree to comply with the provisions of all statutes ream familiar with and accept the obligations of my position of the configurations of my position of the configurations of my position of the configurations of the c	nintment as registe elating to the prope as registered agent	red agent and agree to act in this capac ir and complete performance of my dutie	ity. 1
	(CONTINUED)		
	_(CONTINUED;		

SIDA MAY 21 BR 1 CO

ARTICLE IV-

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Olga Ugartechea
7 (1) (2)	14414 SW 109th Street
	Miami, FL. 33186
	10100 II, 7 C. 00100
AMBR	Marco Ugartechea, Sr.
	14414 SW 109th Street
	Miami, FL, 33186
NOD	Marian Harrison II.
MGR	Marco Ugartechea, Jr.
	14414_SW_109th_Street
	Miami, FL 33186
MGR	Carolina Ugartechea
	14414 SW 109th Street
	Miami, FL, 33186
(Use attachment if necessary)	
ICLEV: Effective date if other than the da	nte of filing: (OPTIONAL)
	specific and cannot be more than five business days prior to or 90 days after
late of filing.)	, , , , , , , , , , , , , , , , , , , ,
e: If the date inserted in this block does no	it meet the applicable statutory filing requirements, this date will not be listed a
•	

REQUIRED SIGNATURE:

Signature of a member of 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 a third degree felony as provided for in s.817.155, F.S.

Olga Ugartechea

Typed or printed name of signee

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)