Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H150000369763)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet,

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: AKERMAN LLP - MIAMI Account Name

Account Number: 075471001363

: (305)374-5600

Tax Number

: (305)374-5095

**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.

1015 NW 2nd Avenue, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.0

FEB 1 3 2015

Electronic Filing Menu

Corporate Filing Menu

Help

(H15000036976 3)

DISTER 12 PAIR 38

ARTICLES OF ORGANIZATION 1015 NW 2nd AVENUE, LLC

ARTICLE I: - Name

The name of the Limited Liability Company is: 1015 NW 2nd AVENUE, LLC

ARTICLE II: - Address

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

> 301 West 41st Street Suite 406 Miami Bench, Florida 33140

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

> Karen Llera 301 West 41st Street Suite 406 Miami Beach, Florida 33140

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, 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 familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Karen Llera, Registered Agent

(H15000036976 3)

(H15000036976 3)

ARTICLE IV: - Management

The name and address of the persons authorized to manage and control the limited liability company are as follows:

Title:

Name and Address:

MGR

Michael Simkins

301 West 41st Street

Suite 406

Miami, Florida 33140

MGR

Ronald Simkins

301 West 41st Street

Suite 406

Miami, Florida 33140



IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on February 12, 2015.

Michael Simkins, Authorized Signer

(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 herein 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 Section 817.155, Florida Statutes.)

Michael Simkins
Typed or printed name of signee