

# L15000092126

Division of Corporations

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

95001

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FLORIDA LIMITED LIABILITY CO.  
54 STREET PROPERTIES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
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May 26, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CORP USA

SUBJECT: 54 STREET PROPERTIES, LLC  
REF: W15000036618

DL

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

If you have any further questions concerning your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

FAX Aud. #: H15000124759  
Letter Number: 415A00010936

P.O BOX 6327 - Tallahassee, Florida 32314

H15000124759

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

Date: May 19, 2015

**ARTICLE I - NAME:**

The name of the Limited Liability Company is:

**54 STREET PROPERTIES, LLC**

**ARTICLE II - ADDRESS:**

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

**340 GLENRIDGE ROAD  
KEY BISCAYNE, FL 33149**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, &  
REGISTERED AGENT'S SIGNATURE:**

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

**ENRIQUE LOPEZ**

Name

**340 GLENRIDGE ROAD**

Florida Street Address

**KEY BISCAYNE, FL 33149**

City, State, and Zip

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TALLAHASSEE, FLORIDA

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 605.0203 (1)(a)

  
\_\_\_\_\_  
Registered Agent's Signature  
ENRIQUE LOPEZ

#### **ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be considered a single manager LLC and is therefore a SINGLE MANAGER LLC company. The NAME and ADDRESS of the initial MANAGER/OWNER is as follows:

Title  
Manager/Owner

Name and Address:  
LOMAS INVESTMENTS, LLC  
340 GLENRIDGE ROAD  
KEY BISCAYNE, FL 33149

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**ARTICLE V BUSINESS DEDUCTIONS**


Per IRS regulations the corporation may pay and deduct the health insurance and medical expenses of its directors and employees. Additionally, business auto expenses may be reimbursed to directors and employees and thus deducted from current operations.

**ARTICLE VI - EFFECTIVE DATE**

The effective date of the Limited Liability Company shall be: May 19, 2015

  
\_\_\_\_\_  
Signature of member or an authorized representative of a member

In accordance with section 605.02030(1)(b) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true

  
\_\_\_\_\_  
**ENRIQUE LOPEZ**  
Agent/Manager of LOMAS INVESTMENTS, LLC

May 19, 2015

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JULIA HARRIS, CLERK