

# L18000240570

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

((H18000302394 3)))



H180003023943ABC/

**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)617-6381

From:  
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

**\*\*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.  
LQ FLORIDA HOSPITALITY, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 0        |
| Page Count            | 03       |
| Estimated Charge      | \$130.00 |

63 01 18 01 13 17

18 OCT 18 AM 11:49

FILED

**ARTICLES OF ORGANIZATION  
FOR  
LQ FLORIDA HOSPITALITY, LLC**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**LQ FLORIDA HOSPITALITY, LLC**

**ARTICLE II - ADDRESS**

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

**3905 N.W. 107<sup>TH</sup> AVENUE  
SUITE # 501  
DORAL, FLORIDA 33178**

**ARTICLE III - BUSINESS PURPOSE**

The purpose of the Limited Liability Company is to engage in any lawful act or activity for which the limited liability companies may be formed under the Florida Revised Limited Liability Company Act of the State of Florida (the "Act").

**ARTICLE IV - MANAGEMENT OF BUSINESS**

The name and address of the manager of this Limited Liability Company is:

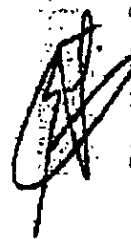
**NAME**

**Benito Irastorza**

**ADDRESS**

**3905 NW 107<sup>TH</sup> AVENUE, SUITE 501  
DORAL, FLORIDA 33178**

The business of this Limited Liability Company shall be managed by the manager in a meeting, or by written consent without a meeting. Benito Irastorza is hereby appointed as Manager to carry out, subject to the direction of members, the day to day business of this Limited Liability Company.

  
18 OCT 18 AM 11:49  
FILED

**ARTICLE V - REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT'S SIGNATURE**

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

Juan C. Valdes, Esq.  
1313 Ponce De Leon Blvd., Suite 200  
Coral Gables, Florida 33134

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 805, F.S.

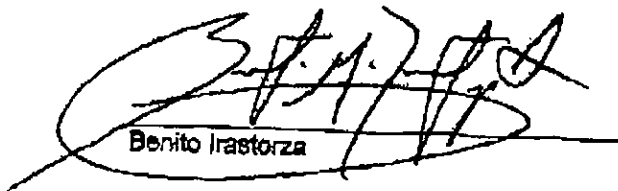


Juan C. Valdes, Esq., Registered Agent

**ARTICLE VI - AMENDMENTS**

These articles may be amended from time to time by a unanimous written consent of all the members, and the amendment shall be filed, duly signed by all members of this Limited Liability Company, with the Florida Department of State.

(In accordance with section 805.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



Benito Irastorza

19 OCT 18 AM 11:43

FILED