

Florida Department of State
Division of Corporations
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L25000007385 **4/16/25**

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : ALEJANDRO E. JORDAN, JD, P.A.
Account Number : I20210000179
Phone : (305)501-2836
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FLORIDA LIMITED LIABILITY CO.
4101 NW 3RD AVE LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

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DIVISION OF CORPORATIONS

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**ARTICLES OF ORGANIZATION OF
4101 NW 3RD AVE LLC**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I -Name:

The name of the Limited Liability Company is:

4101 NW 3RD AVE LLC

ARTICLE II -Address:

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

121 Alhambra Plaza, Suite 1500
Coral Gables, FL 33134

ARTICLE III -Registered Agent and Registered Office

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

ALEJANDRO E. JORDAN, JD. P.A.
121 Alhambra Plaza, Suite 1500
Coral Gables, FL 33134

ARTICLE IV - Managers

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	<u>Name and Address</u>
Manager	JOSE MANRIQUE 121 Alhambra Plaza, Suite 1500 Coral Gables, FL 33134

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledge them to be my act this 3rd day of January 2025.

DocuSigned by:

JOSE MANRIQUE

Name: JOSE MANRIQUE

Title: Manager

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(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, F.S.)

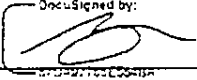
DocuSigned by
JOSE MANRIQUE
320354c78706480
Name: JOSE MANRIQUE
Title: Manager

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 605, Florida Statutes.

(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, F.S.)

Signature of Registered Agent

DocuSigned by:

By: Alejandro E. Jordan, JD, P.A.
Title: Registered Agent

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