

Florida Department of State  
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**FLORIDA LIMITED LIABILITY CO.  
 MARIN PROPERTY SOLUTIONS LLC**

Certificate of Status	1
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TALLAHASSEE, FL

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")*

*Marin Property Solutions LLC*

## ARTICLE II - Address:

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

230 NE 4th st APT 2912 Miami, Fl 33132

## ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: *(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)*

*Nelson Alfredo Marin*

230 NE 4th St APT 2912 Miami , FL 33132

## ARTICLE IV

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

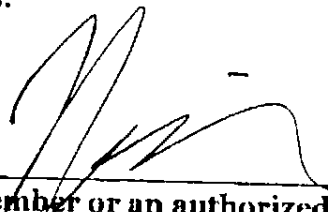
Nelson Alfredo Marin (AMBR )

230 Ne 4th st Apt 2912 Miami, Fl 33132

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**Required Signatures:**



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

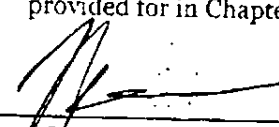
In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

\_\_\_\_\_  
**Nelson Alfredo Marin**

**Typed or printed name of signee**

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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..



\_\_\_\_\_  
**Registered Agent's Signature (REQUIRED)**