

# Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page as a PDF document. Do not fax audit number  
(shown below) to the bottom of all pages of the document.

((H250000531243ABCW))



H250000531243ABCW

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 : RCA ACCOUNTING SERVICES CORP  
Account Number : I20180000102  
Phone : (305)799-7633  
Fax Number : (305)564-6857

\*\*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.  
501 DOWNTOWN CONDO 1003 LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

**Articles of Organization  
For  
Florida Limited Liability Company**

**Article I**

The name of the Limited Liability Company is:  
**501 DOWNTOWN CONDO 1003 LLC**

**Article II**

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

**8180 NW 36TH STREET STE 409A  
MIAMI, FL 33166**

The mailing address of Limited Liability Company is:

**8180 NW 36TH STREET STE 409A  
MIAMI, FL 33166**

**Article III**

Other provisions, if any:

**ANY AND ALL LAWFUL BUSINESS**

**Article IV**

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

**RICHARD SEGUNDO CASTIBLANCO GOMEZ  
8180 NW 36TH STREET STE 409A  
MIAMI, FL 33166**

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.

Registered Agent Signature: 

### Article V

The name and address of person(s) authorized to manager LLC:

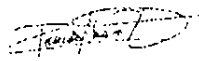
Title: **MANAGER**  
**RICHARD SEGUNDO CASTIBLANCO GOMEZ**  
**8180 NW 36TH STREET STE 409A**  
**MIAMI, FL 33166**

Title: **MANAGER**  
**NUTRAMERICAN PHARMA SAS**  
**8180 NW 36TH STREET STE 409A**  
**MIAMI, FL 33166**

### Article VI

The effective date for this Limited Liability Company shall be:

Signature of member or an authorized representative



I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

