125000068936

(Requestor's Name)
, ,
(Address)
(Address)
(City/State/Zip/Phone #)
·
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900444227089

2025 FEB 18 AM 9: 47

2235 FEB 18 PK 3: 12

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-54372 (850) 524-6243 Please use funds from the account <u>I20210000160</u>: \$125.00 Authorization Signature___ Cat Cay Partners LLC #Document Business Name Will wait Walk in Certified Copy Certificate of Status **AMENDMENTS NEW FILINGS** Amendment __ Profit ____Resignation of R.A. Not for Profit Change of Registered Agent
Revocation of Dissolution _X__LLC Domestication Conversion INC ___Statement of Authority CORP Merger **OTHER REVOCATION OF DISSOLUTION** REGISTRATION/QUALIFICATIONS **OTHER FILINGS** Foreign Filing TRANSMITTAL LETTER Partnership Reinstatement Fictitious Name Statement of CORRECTION ___ Statement of Authority Domestication of a Foreign Corp. ___ APOSTIL _ COUNTRY Other

EXAMINER'S INITIALS: __ __

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-54372 (850) 524-6243 Please use funds from the account 120210000160: \$125.00 Authorization Signature___ Cat Cay Partners LLC Business Name #Document Will wait Walk in Certified Copy Certificate of Status **NEW FILINGS** <u>AMENDMENTS</u> _ __ Amendment Profit Resignation of R.A. Not for Profit _X_ LLC Change of Registered Agent Revocation of Dissolution Domestication Conversion INC Statement of Authority **CORP** Merger **OTHER REVOCATION OF DISSOLUTION REGISTRATION/QUALIFICATIONS OTHER FILINGS** Foreign Filing TRANSMITTAL LETTER Partnership Reinstatement Fictitious Name Statement of CORRECTION ___ Statement of Authority Domestication of a Foreign Corp. ___ APOSTIL ____COUNTRY Other

EXAMINER'S INITIALS:_____

COVER LETTER

	New Filing Sec Division of Co						
SUBJEC		PARTNERS LLC					
SOBJEC		Name of Lim	ited Liabili	ty Company		_	
The enclo	osed Articles of	Organization and fee(s) are	submitted	for filing.			
Please re	turn all correspo	ondence concerning this ma	ter to the f	ollowing:			
	Jonathan Ew	ring, Esq.					
			Name of	Person			
	Aero Law C	enter					
		· · · · · · · · · · · · · · · · · · ·	Firm/Co	mpany		_	
	1100 Lee W	agener Blvd Ste 211				; - ;	2025 F1
	· · · · · · · · · · · · · · · · · · ·		Addro	ess			8
	Fort Laudere	dale, Fl. 33315				,	18 AM
			ty/State and	d Zip Code		: لنثــــــــــــــــــــــــــــــــــــ	
		lawcenter.com				<u> </u>	6: 4ا
		E-mail address: (to be used	for future a	nnual report notificati	on)		
For further	information co	oncerning this matter, please	call:				
	Colette Jeans	neau 95 at (4	666-7817			
	Nam	ne of Person Ar	ea Code	Daytime Telephon	e Number		
Parlaged	lie e chanle four	ha fallawina amaunt					
	00 Filing Fee	he following amount: \$\Bigsire\$\$\sums\$\$\sums\$\$\sums\$\$\text{S130.00 Filing Fee & Certificate of Status}\$\$	Certific	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.0 Certifica Certified (additional	te of Stat Copy	us &
	New F Divisi P.O. E	ng Address Filing Section on of Corporations Box 6327 bassee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230	assee et, Suite 810		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	CAT CAN DADTMING LLC			
	CAT CAY PARTNERS LLC (Must contain the words "Limited Liabil	ity Company, "L.L.C.,"	or "LLC.")	
	E II - Address: ng address and street address of the principal office of	of the Limited Liability	Company is:	
	Principal Office Address:			
	11000 SE 83rd Ave, Miami, FL 33156	11000 SE 831	d Ave, Miami, FL 33156	
The name	and the Florida street address of the registered agen JONATHAN A. EWING. Nan 1100 LEE WAGENER BI Florida street address (P.C.)	ESQ. ne .VD STE 211	<u> </u>	2025 FEB 18 AM 9: 47
	FORT LAUDERDALE	FL	33315	
place desig further agr	City on named as registered agent and to accept service of pated in this certificate. I hereby accept the appointmee to comply with the provisions of all statutes relating with and accept the obligations of my position as reg	ent as registered agent g to the proper and com	and agree to act in this capacity. plete performance of my duties,	. 1

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:					
"AMBR" = Authorized Member						
"MGR" = Manager						
MGR	Carlos Saladrigas					
	11000 SW 83rd Ave. Miami. FL 33156					
MGR	Michael E. Moran					
MOR	8845 School House Rd, Coral Gables, Fl. 33156					
MOD	Duran Hankar Charles					
MGR	Dougan Hughes Clarke 630 Marquesa Dr., Coral Gables, Fl. 33156					
	OWN Hardress 1711. Colum Guoren, 1750 150					
MGR	Alvaro Guerrero-Ferber 3841 Kent Ct., Miami, Fl., 33133					
	3841 Kelli Ct., Wildilli, 11, 3,7133					
	3841 Kent Ct Miami, FL. 33133					
(Use attachment if necessary)	, 8					
ARTICLE V: Effective date, if other than the da	ate of filing: 2/18/2025 :					
(If an effective date is listed, the date must be	specific and cannot be more than five business days prior to or 90 days after;					
the date of filing)						
Note: If the date inserted in this block does no	t meet the applicable statutory filing requirements, this date will not be listed as					
the document's effective date on the Department	nt of State's records.					
ARTICLE VI: Other provisions, if any.						
· · · · · · · · · · · · · · · · · · ·						
REQUIRED SIGNATURE:	Carlos Saladrigas					
	388FB7BE850405					
Signature of a member or an authorized representative of a member.						

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document of the Department of State

constitutes a third degree felony as provided for in s.817.155, F.S.

Carlos Saladrigas, Manager

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)