

11/15/23, 2:50 PM

Division of Corporations

# 1230003957003

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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### FLORIDA LIMITED LIABILITY CO. SMASH INVESTMENT REAL ESTATE LLC

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November 16, 2023

## FLORIDA DEPARTMENT OF STATE

EXPRESS CORPORATE FILING SERVICE INC. Division of Corporations

SUBJECT: SMASH INVESTMENT REAL ESTATE LLC  
REF: W23000155531

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

SIGNATURE IS ILLEGIBLE, TO SMALL TO MAKE OUT.,

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Tabitha J Howell  
Regulatory Specialist II  
New Filings SectionFAX Aud. #: H23000395700  
Letter Number: 923A00026579FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FL

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

SMASH INVESTMENT REAL ESTATE LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

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

Principal Office Address:Mailing Address:

1861 SW 154th PL

MIAMI, FL 33185

1861 SW 154th PL

MIAMI, FL 33185

## ARTICLE III - Registered Agent, Registered Office, &amp; Registered Agent's Signature:

(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.)

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

JORGE LLERENA

Name

1861 SW 154th PL

Florida street address (P.O. Box **NOT** acceptable)

MIAMI

FL

33185

City

State

Zip

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.

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Nov-16 2023 01:47:22 PM

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**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

AMBR

JORGE LLERENA

1361 SW 154th PL

MIAMI, FL 33185

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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 not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

**REQUIRED SIGNATURE:**

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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 to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

JORGE LLERENA

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)

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