

# L03000038480

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000293051 3)))

**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) 205-0383

**From:**

Account Name : PAUL SALVER, P.A.  
Account Number : I20020000087  
Phone : (954) 389-1333  
Fax Number : (954) 389-1397

## LIMITED LIABILITY COMPANY

American Homes Realty, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

[Electronic Filing Menu](#)

[Corporate Filing](#)

[Public Access Help](#)

RECEIVED  
03 OCT -9 AM 8:13  
DIVISION OF CORPORATION

03 OCT -9 AM 9:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

10-91

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

American Homes Realty, LLC

ARTICLE II - Address:

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

Principal Office Address:

1672 Bunting Lane  
Weston, FL 33327

Mailing Address:

1672 Bunting Lane  
Weston FL 33327

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

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

Paul Salver  
Name  
2721 Executive Park Dr. #4  
Florida street address (P.O. Box **NOT** acceptable)  
Weston FL 33331  
City, State, and 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 608, F.S.

[Signature]  
Registered Agent's Signature

(CONTINUED)

AND  
FILED  
03 OCT -9 AM 9:24  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Claudia S. Schulz  
1672 Bunting Lane  
Weston, FL 33327

MGR

Alejandro Tabasky  
1672 Bunting Lane  
Weston, FL 33327

(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**

  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Claudia Schulz  
Typed or printed name of signee

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

APPROVED  
AND  
FILED  
03 OCT -9 AM 9:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA