

L04000018735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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400028829554

02/20/04--01067--010 \*\*78.75

03/10/04--01019--021 \*\*51.25

GP

## TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: ST. ANDREWS ESTATE PROPERTY MANAGEMENT COMPANY LLC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

W04-8599

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: HECTOR R BETANCOURT

Name (Printed or typed)

6929 BARBAROSSA ST.

Address

BOCA RATON, FL 33433

City, State & Zip

(561) 702-6809 (email: betancourt@bellsouth.net)

Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 2, 2004

HECTOR R. BETANCOURT  
6929 BARBAROSSA ST.  
BOCA RATON, FL 33433

SUBJECT: ST. ANDREWS ESTATE PROPERTY MANAGEMENT COMPANY  
LLC  
Ref. Number: W04000008599

We have received your document for ST. ANDREWS ESTATE PROPERTY MANAGEMENT COMPANY LLC and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$51.25. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Limited Liability Companies are not corporations. Limited Liability Companies are unique business entities with special characteristics and attributes formed under Chapter 608, Florida Statutes. Corporations, on the other hand, are formed under Chapter 607, Florida Statutes, and possess other distinctive traits and characteristics. Consequently, limited liability company documents cannot contain any references/terms which may implicate the entity is a corporation. Please delete any references to the term "corporation" or the like from your document.

Chapter 608, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 004A00014007

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: St. Andrews Estate Property Management Co. LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hector Betancourt

(Name of Person)

(Firm/Company)

20283 State Rd. 7, Suite 300

(Address)

Boca Raton, FL 33498

(City/State and Zip Code)

For further information concerning this matter, please call:

Hector Betancourt

(Name of Person)

at ( 561 ) 883 8138

(Area Code & Daytime Telephone Number)

### STREET ADDRESS:

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**St. Andrews Estate Property Management Co. LLC**

**ARTICLE II - Address:**

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

**Principal Office Address:**

**20283 State Road 7**

**Suite 300**

**Boca Raton, FL 33498**

**Mailing Address:**

**Same**

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

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

**Hector Betancourt**

Name

**6929 Barbarossa St.**

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

**Boca Raton, FLORIDA 33433**

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, Florida Statutes.*

  
Registered Agent's Signature

**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

MGRM

**Name and Address:**

Antonio Paez  
19286 Cloister Lake Lane  
Boca Raton, FL 33498

MGRM

Jorge Svistunov  
11027 Baybreeze Way  
Boca Raton, FL 33428

MGRM

Hector Betancourt  
6929 Barbarossa St.  
Boca Raton, FL 33433

(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.)

**Hector Betancourt**

Typed or printed name of signer

**Filing Fees:**

~~\$100.00~~ Filing Fee for Articles of Organization

~~\$75.00~~ Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

~~\$ 5.00~~ Certificate of Status (Optional)