

L04000070821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

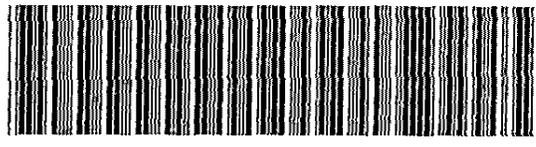
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/23/04--01025--004 **125.00

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DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DIXIE / 214 LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

RICHARD SCHWARTZ
(Name of Person)

MAYNARD RICH CO.
(Firm/Company)

7850 NW 146 ST #308
(Address)

Miami Lakes FL 33016
(City/State and Zip Code)

For further information concerning this matter, please call:

Richard Schwartz at (305) 556-7162
(Name of Person) (Area Code & Daytime Telephone Number)

04 SEP 23 PM 3:17
DIVISION OF CORPORATIONS

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:

DIXIE / 214 LLC

ARTICLE II - Address:

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

Principal Office Address:

c/o Maynard Rich Cos.
7850 NW 146 ST # 308
Miami Lakes FL 33016

Mailing Address:

Maynard Rich Cos.
7850 NW 146 ST #308
Miami Lakes FL 33016

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

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

Richard Schwartz

Name

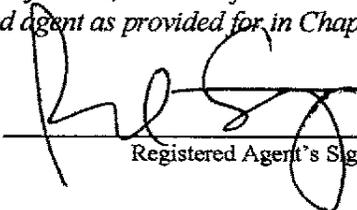
76 Ivy Rd.

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

Hollywood FLORIDA 33021

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

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STATE OF FLORIDA
DIVISION OF CORPORATIONS

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

RICHARD SCHWARTZ
7850 NW 146 ST #308
MIAMI LAKES FL 33016

MGRM

CARL MAYNARD
7850 NW 146 ST #308
MIAMI LAKES FL 33016

MGRM

JACK DISKIN
7850 NW 146 ST #308
MIAMI LAKES FL 33016

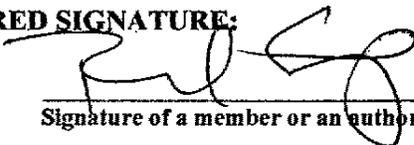
MGRM

Dorothy Gainsky
7850 NW 146 ST #308
MIAMI LAKES FL 33016

(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.)

Richard Schwartz

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)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS