Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : BERGER SINGERMAN - FORT LAUDERDALE

Account Number : I20020000154 Phone : (954)525-9900 Fax Number : (954)523-2872

# FLORIDA/FOREIGN LIMITED LIABILITY CO.

Minerva Holdings, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00 <sub>0</sub>

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Corporate Filing Menu

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SECRETARY OF STATE DIVISION OF CORPORATIONS 850-205-0381

10/5/2008 11:08 PAGE 001/001

Florida Dept of State



Ostober 5, 2006

FLORIDA DEPARTMENT OF STATE

BERGER SINGERMAN - FORT LAUDERDALE

SUBJECT: MINERVA ROLDINGS, LLC

REP: W06000043808

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.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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Leslie Sellers Document Specialist FAX Aud. #: M06000243795 Letter Number: 605A00059084

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P.O BOX 6327 - Tallahassee, Florida 32314

SECRETARY OF STATE OF OR OCT OF CORPORATIONS

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

Minerva Holdings, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

### ARTICLE II - Address:

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

Mailing Address:	
8800 NW 79th Avenue	
Medley, FL 33166	_
	8800 NW 79th Avenue Medley, FL 33166

ARTICLE III - Registered Agent, Registered Office, & 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:

BSPA Corporate Services, Inc.

Name

350 E. Las Olas Blvd., Suite 1000

Plorida street address (P.O. Box NOT acceptable)

Ft. Lauderdale

Ft. 33301

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.,

BSPA CORPORATE SERVICES, INC.

Registered Agent's Senature (REQUIRED)

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

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

MGRM		Monte Friedkin
		P.O. Box 126100
•		Hialeah, FL 33012
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		in the state of th
·	,	
	1	
(Use attachment if necess	arv)	
`	• •	
LEV: Effective date, if of	her than the di	ate of filing:(OPTIONA

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.)

Monte Friedkin

Typed or printed name of signec

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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