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(Regi	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

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SUBJECT:	E	D.B.	PROPER	гү	MANAGEM	ENT	LLC	_	
			(Name of Limit	ed Liab	ility Company)				
The enclosed	Articles of	Organizatio	n and fee(s) are	submitt	ed for filing.				
Please return	all corresp	ondence con	cerning this mat	ter to th	e following:				
		FREDE	rick <sup>1</sup>	⊳.	BURTON				
	······································			(Name	of Person)			-	_
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			(CI	ty/State	and Zip Code)			-	77
For further in	ıformation (	concerning t	nis matter, pleas	e call:				-	אַרְאָּ אָרָאָיִרְ
FREDI	FRICK	BURTO	0N	_ at (_	(Area Code & Da		1		
	(Name	of Person)			(Area Code & Da	aytime i ei	epnone Number	ر,	e n
Enclosed is	a check fo	r the follow	ing amount:					<b>.</b>	<u>بر</u> ر
<b>以</b> \$125.00 F	-	\$130.0	00 Filing Fee & e of Status	Ce	\$155.00 Filing I tified Copy litional copy is encl	٠	\$160.00 Certificate of Certified Control (additional control)	ору	;
		Division of P.O. Box	on Section of Corporations		Street/Courier Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	ction orporation ig e Center (	s		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Lim	ited Liability Com	•				
(Must end with the words "I	. B. PROPE	RTY MAN	AGEM	ENT C	-LC	
(Must end with the words "I	Limited Liability Compa	ny, "Limited Compa	ny" or their	abbreviation "LLC	C," or "L.C.,")	
ARTICLE II - Addr The mailing address		of the principal	office of	f the Limited L	iability Comp	any is:
Principal Office Ad	dress:	Maili	ng Add	ress:		
3350 N.E. / # 23881 Ft. LAUDERDALE	12 AVE	<u>Po</u>	Box	23881		_
# 23881		<u> </u>	LAUD	ERDALE,	<u>FL</u>	
FT. LAVDERDALE	<u> </u>	<u> </u>		33307		
(The Limited Liability Combusiness entity with an act The name and the Flo	ive Florida registration.) orida street address FREDERI	of the registere CK D. Bi Name	d agent	are:	0 FEB	DIVISION OF CORP
_		AXBROOK street address (P.C		_	$\omega$	02.5
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registered agent and statutes relating to	l as registered agen o at the place design I agree to act in this the proper and con ations of my position	t and to accept s nated in this cert s capacity. I furt nplete performa	ervice oj ificate, I her agre ice of my gent as p	f process for the hereby accept we to comply with a duties, and I corovided for in	the appointment th the provision am familiar wi	nt as ns of all th and

(CONTINUED) Page 1 of 2

		Name and Address:	
"MGR" = Mana	ger		
"MGRM" = Ma	naging Member		
60.7.0			
MGR	<del></del> -	FREDERICK D. BURTON	_
=		PO BOX 23881	
		FT. LAUDENDALE FL 33307	_
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ARTICLE IV- Manager(s) or Managing Member(s):