

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (650)205-0383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

: (850)878-5926

Fax Number

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

1470 LLC

Certificate of Status Certified Copy Page Count 03 Estimated Charge \$125.00

**RLH** 

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Corporate Filing Menu

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4/16/2007

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	Limited Liability Company is:		
470 LLC			•
Most end with the wo	ds "Limited Liability Company, "Limited Co	ompany" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - A			
The mailing addr	ess and street address of the princi	pal office of the Limited Liability Compa	any is:
Principal Office	Address: M	failing Address:	
194 South Beach Re	ad 19	94 South Beach Road	
Hobe Sound, FL 33	155 H	lobe Sound, FL 33455	
The Limited Liability	Registered Agent, Registered Of Company cannot serve as its own Registered n active Florida registration.)	ffice, & Registered Agent's Signature: Agent. You must designate an individual or another	07 APR
The name and the Florida street address of the registered agent are:			- 5
	James P. Gori	ter	
•	Name		
	194 South Beach	Road	- : <del>'.</del> '√

Having been named as registered agent and to accept service of process for the above stated limited biability 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.

Florida street address (P.O. Hox NOT acceptable)

James P. Gortes

Hobe Sound, FL 33455 City, State, and Zip

Registered Agent's Signature (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: Name and Address: Title: "MGR" = Manager "MGRM" - Managing Member James P. Gorter, as Trustee of the Ismes P. Gorter MGR Revocable Trust, dated July 29, 1997 194 S. Beach Rd., Hobe Sound, FL 334SS (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) <u>REQUIRED</u> SIGNATURE: Signature of a member of an authorized representative of a member.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Cartified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee

PLOSE - 9/09/05 C T Bystem Online