

L07000075581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

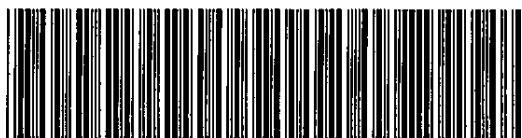
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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2007 JUL 20 A 7:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

2500 N. Military Trail # 260, Boca Raton, Florida 33431
Tel (561) 953-1050 • Fax.(561) 953-1940

**Goldstein, Levy &
Gross, PA**

July 3, 2007

Registration Section
Divisions of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: ALBAN, LLC

We are enclosing a check in the amount of \$130 as filing fees for the Florida Limited Liability Company. The Transmittal Letter and Articles of Organization are filed out and signed.

All correspondence should be through our office. Thank you.

Sincerely,

Barbara P. Schwartz

Barbara P. Schwartz

2007 JUL 20 AM 7:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 9, 2007

BARBARA P. SCHWARTZ
ARNOLD S. GOLDSTEIN & ASSOCIATES
2500 N. MILITARY TRAIL #260
BOCA RATON, FL 33431

SUBJECT: ALBAN, LLC
Ref. Number: W07000032297

We have received your document for ALBAN, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 307A00043639

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
32310
JUL 10 2007

FILED

2500 N. Military Trail # 260, Boca Raton, Florida 33431
Tel (561) 953-1050 • Fax (561) 953-1940

**Goldstein, Levy &
Gross, PA**

July 16, 2007

Registration Section
Divisions of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: ALBAN GROUP, LLC

I am enclosing a revised Articles of Organization to be filed.

All correspondence should be through our office. Thank you.

Sincerely,

Barbara P. Schwartz

Barbara P. Schwartz

FILED
2007 JUL 20 A 7:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALBAN, 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:

Barbara P. Schwartz
(Name of Person)

Arnold S. Goldstein & Associates
(Firm/Company)

2500 N. Military Trail # 260
(Address)

Boca Raton, FL 33431
(City/State and Zip Code)

FILED
2007 JUL 20 A 7:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Barbara P. Schwartz at (561) 953-1050
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ALBAN GROUP, 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:

Principal Office Address:

Mailing Address:

347 N. NEW RIVER DRIVE E. # 605
FORT LAUDERDALE, FL 33301

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:

JACQUELINE DENOBRIGA

Name

347 N. NEW RIVER DRIVE E # 605

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

FORT LAUDERDALE FL 33301

City, State, and Zip

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2007 JUL 20 A 7:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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:

MGR _____

JACQUELINE DENOBRIGA _____

347 N. NEW RIVER DRIVE E # 605 _____

FORT LAUDERDALE, FL 33301 _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ . (OPTIONAL)

(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.)

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.)

JACQUELINE DENOBRIGA _____

Typed or printed name of signee

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)