

W08000005484

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

NORTH SHORE PROPERTY PARTNERS, LLC

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ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
NORTH SHORE PROPERTY PARTNERS, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
The incomplete name was typed on the Articles of Organization when the form was transcribed from handwritten to typewritten.

The correct name of the limited liability company is NORTH SHORE HOLDINGS PROPERTY PARTNERS, LLC.

OR

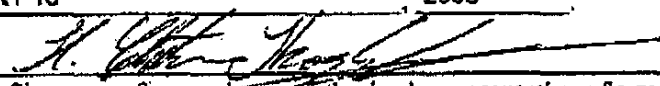
- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

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Dated: JANUARY 18, 2008


Signature of a member or authorized representative of a member

HANS CHRISTIAN SKOGLUND

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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H08000008693

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

North Shore Property Partners, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

1205 Lincoln Road, Suite 211

Miami Beach, Florida 33139

Mailing Address:

1205 Lincoln Road, Suite 211

Miami Beach, Florida 33139

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:

Gustaf Arnoldsson

Name

1470 Lincoln Terrace #3

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

Miami Beach FL 33139

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.


Registered Agent's Signature (REQUIRED)

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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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

mgr

Gustaf Arnoldsson

1470 Lincoln Terrace #3

Miami Beach, Florida 33139

mgrm

Hans Christian Skoglund

708 Pennsylvania Avenue #7

Miami Beach, Florida 33139

(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.)

Hans Christian Skoglund

Typed or printed name of signer

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)

Page 2 of 2.

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