

L08000061529

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

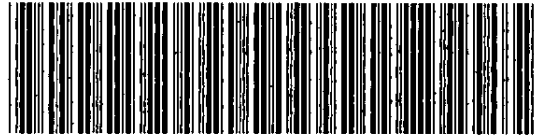
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400131502104

06/23/08--01016--013 **160.00

Effective Date 06/17/08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 JUN 23 AM 10:40

FILED

T. HAMPTON

JUN 24 2008

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 180 NE 6TH AVENUE 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:

BRIAN F. CALIFANO
(Name of Person)

(Firm/Company)

2647 FRANCES STREET
(Address)

BELLMORE, NY 11710
(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN CALIFANO
(Name of Person)

at (**347**) **861-4434**
(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

Effective Date 06/17/08

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

180 NE 6TH AVENUE 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:

Mailing Address:

180 N.E. 6TH AVENUE WA
DELRAY BEACH, FL 33483

2647 FRANCES STREET
BELLMORE, NY 11710

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:

7912 SONOMA 204 LLC

Name

7912 SONOMA SPRINGS CIRCLE SUITE 204

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

BOYNTON BEACH FL 33463

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..

[Handwritten Signature]

Registered Agent's Signature (REQUIRED)

FILED
08 JUN 23 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

SEE ATTACHED

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 6/17/08. (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.)

BRIAN F. CALIENDO

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)

FILED
 08 JUN 23 AM 10:40
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Attachment to Article IV - Managers of LLC

<u>Title</u>	<u>Name</u>	<u>Address</u>
Manager	Brian F. Califano	2647 Frances Street, Bellmore, NY 11710
Manager	Louis Faiella III	296 Bayview Avenue, Massapequa, NY 11758
Manager	Louis S. Faiella	3086 Susan Road, Bellmore, NY 11710
Manager	Marc Kaplan	2956 Wilson Avenue, Wantagh, NY 11793
Manager	Russell Kaplan	3136 Lydia Lane, Bellmore, NY 11710
Manager	Anthony Sampino	55 West London ^{LANE} , Bay Shore, NY 11706
Manager	John Vullo	35 Garnier Lane, Bay Shore, NY 11706

FILED
08 JUN 23 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA