

L09000120215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

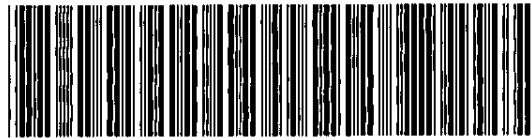
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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B. KOHR

DEC 18 2009

EXAMINER

Sunstate Research
Requester's Name

Address

City/State/Zip

656-5454
Phone #

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DIVISION OF CORPORATIONS
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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. 831-845 N. Federal Highway, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☐ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☒ Limited Liability
☐ Domestication
☒ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

**ARTICLES OF ORGANIZATION FOR 831-845 N. FEDERAL HIGHWAY, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

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ARTICLE I - Name

The name of the Limited Liability Company is:

831-845 N. Federal Highway, LLC

ARTICLE II - Address

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

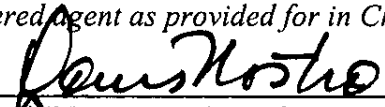
748 Rue Marie-Reine-Clermont
Laval, Quebec H7X3Y2

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Louis Nostro, Esquire
c/o Shutts & Bowen LLP
201 South Biscayne Boulevard, Suite 1600
Miami, Florida 33131

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.


Louis Nostro, Registered Agent

ARTICLE IV - Manager

The name and address of the Manager is as follows:

Michael Didical
748 Rue Marie-Reine-Clermont
Laval, Quebec H7X3Y2

REQUIRED SIGNATURE:


Louis Nostro, Authorized Representative

(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.)