110000048217

(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:
L. SELLERS MAY -5. 2010
EXAMINER

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05/03/10--01025--011 **160.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO:

Registration Section

Division of Co	rporations		
SUBJECT: Steven N	M Lovinger Realty Hold	ings 1, LLC.	
SOBOLCI:		ed Liability Company	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this matt	ter to the following:	
Steven M Lov	inger		
		Name of Person	
<u></u>	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
4906 Primrose	e Path		
		Address	
Sarasota, FL	34242		
	Cit	y/State and Zip Code	
steven.lovinge	er@yahoo.com E-mail address: (to be used to	for future annual report notification)	-
For further information	concerning this matter, please	e call:	
		eministry from a familian	
Steven M Lovinger	of Person	at (941) 552-9973 Area Code & Daytime Telephone Number	_
rvaine (Area code & Daytime Pelephone Pullion	
Enclosed is a check for	or the following amount:		
□\$125.00 Filing Fee	2\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Certificate of S Certified Copy (additional copy is	Status &
	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	
	STANDAR SHA		

ARTICLES OF O	ORGANIZATIO	N FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Na The name of the L	me: .imited Liability C	ompany is:
	nger Realty Hold	dings 1, LLC. *Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Ac The mailing addre		ess of the principal office of the Limited Liability Company is:
Principal Office	Address:	Mailing Address:
4906 Primrose Path		4906 Primrose Path
Sarasota, FL 34242		Sarasota, FL 34242
(The Limited Liability C business entity with an	Company cannot serve as active Florida registration	Registered Office, & Registered Agent's Signature: sits own Registered Agent. You must designate an individual or another on.) ress of the registered agent are:
	Steven M Lovin	ger
		Name
	4906 Primrose	Path
	Floi	rida street address (P.O. Box NOT acceptable)
	Sarasota	FL 34242
		City, State, and Zip
liability compo registered agent o statutes relating	any at the place des and agree to act in i to the proper and i	gent and to accept service of process for the above stated limited signated in this certificate, I hereby accept the appointment as this capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with and tion as registered agent as provided for in Chapter 608, F.S
		<i>1</i> '

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:

"MGR" = Manager "MGRM" = Managing Me	ember
MGR	Steven M Lovinger
	4906 Primrose Path
	Sarasota, FL 34242
	
Use attachment if necessa	ary)
LE V: Effective date, if oth ective date is listed, the da	ner than the date of filing: April 30, 2010 . (OPTION ate must be specific and cannot be more than five business d
LE V: Effective date, if oth ective date is listed, the date	ner than the date of filing: April 30, 2010 . (OPTION ate must be specific and cannot be more than five business d
LEV: Effective date, if oth fective date is listed, the date date of filin	ner than the date of filing: April 30, 2010 . (OPTION ate must be specific and cannot be more than five business d.)
(Use attachment if necessa LE V: Effective date, if oth fective date is listed, the dadays after the date of filin REQUIRED SIGNATUR	ner than the date of filing: April 30, 2010 . (OPTION ate must be specific and cannot be more than five business d.)
LE V: Effective date, if oth fective date is listed, the date days after the date of filin	ner than the date of filing: April 30, 2010 (OPTION ate must be specific and cannot be more than five business dig.) RE:
LE V: Effective date, if oth fective date is listed, the date days after the date of filin REQUIRED SIGNATUR	ner than the date of filing: April 30, 2010 (OPTION ate must be specific and cannot be more than five business dig.) RE:
LE V: Effective date, if oth fective date is listed, the dadays after the date of filin REQUIRED SIGNATUR Signature (In accordance of this documents)	ner than the date of filing: April 30, 2010 . (OPTIO) ate must be specific and cannot be more than five business of g.)

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)

Typed or printed name of signee