L13000091771

(Re	equestor's Name)	
(Ac	ldress)	
(,	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nam	ie)
(Do	ocument Number)	
•	ŕ	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
opeoiai matructiona to	Timing Cilicon	
•		

Office Use Only



200248604292

06/10/13--01019--038 **125.00

2813 BN 25 PM 1:33

JUN 2 6 2013 T CLINE



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 11, 2013

ELLIOTT NOEL ZACK
1931NORTH MIAMI BEACH BLVD.
N. MIAMI BEACH, FL 33162

SUBJECT: SLJ REAL ESTATE ASSOCIATES, LLC

Ref. Number: W13000033807

We have received your document for SLJ REAL ESTATE ASSOCIATES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Limited liability companies are either member-managed or manager-managed not both. Member-managed companies are managed by the members of the limited liability company. Manager-managed companies are managed by non-members. Please amend your document to reflect either the limited liability company is member-managed or manager-managed. If the limited liability company is member-managed, list the names and addresses of the members who will manage the company and identify them solely as managing members. If the limited liability company is manager-managed, list the names and addresses of the non-members who will manage the company and identify them solely as managers. You cannot list both managers and managing members.

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) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 313A00014586

COVER LETTER

TO: Registration Section

Division of Corporations

SLJ REAL ESTATE ASSOCIATES 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:

ELLIOT	TT NOEL ZAC	K		
PESET	SKY & ZACK	Name of Person, P.A.		
		Firm/Company		<u> </u>
1031 N	ORTH MIAMI	BEACH	I BLVD.	g ground Appertunity (1809)
		Address		Carried States
N. MIAI	MI BEACH, FI	33162		
		y/State and Zip Cod	le	सुट्र ज
enzack@a				<u> </u>
	E-mail address: (to be used t	or future annual rep	oort notification)	100
For further information	concerning this matter, please	call:		PH 1: 33
Elliott Noe	l Zack	_{at (} 305	,940-0023	
Name	of Person	- '	le & Daytime Telephone Nu	ımber
Enclosed is a check f	or the following amount:			
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fili Certified Co (additional co	opy Certi py is enclosed) Certi	00 Filing Fee, ficate of Status & fied Copy ional copy is enclosed)
	Mailing Address Registration Section		Courier Address	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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	6,	
The hame of the Elimied Elability Company is	5.	
SLJ REAL ESTATE ASSOCIATES. LLC		
(Must end with the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
6815 Biscayne Blvd., Suite 318	6815 Biscayne Blvd., Suite 318	
Miami, Floria 33138	Miami, Florida 33138	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regibusiness entity with an active Florida registration.)	ed Office, & Registered Agent's	dual or another 12
The Limited Liability Company cannot serve as its own Reg	ed Office, & Registered Agent's gistered Agent. You must designate an individ	dual or another
The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	ed Office, & Registered Agent's gistered Agent. You must designate an individ	dual or another 12
The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the	ed Office, & Registered Agent's sistered Agent. You must designate an individe registered agent are:	dual or another 121 August 121 Au
The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the ELLIOTT NOEL ZACK	ed Office, & Registered Agent's gistered Agent. You must designate an individe registered agent are:	dual or another 1981 July 25 PM
The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the ELLIOTT NOEL ZACK Name 1031 NORTH MIAMI BEACH BL	ed Office, & Registered Agent's gistered Agent. You must designate an individe registered agent are:	dual or another 192
The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the ELLIOTT NOEL ZACK Name 1031 NORTH MIAMI BEACH BL	ed Office, & Registered Agent's gistered Agent. You must designate an individe registered agent are: ne	dual or another 1981 July 25 PM

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 (REOUIRED)

(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	Name and Address:
'MGRM" = Managing Membe	r
MGR	SHELDON KLEIN
	6815 Biscayne Blvd., Suite 318
	Miami, Fl 33138
MGR	LUIS OSIO
	9600 N.W. 38th Street
	Miami, Fl 33178
MGR	JUAN CARLOS ALARCON
	9600 N.W. 38th Street
	Miami, FL 33178
Use attachment if necessary)	han the date of filing: (OPTION
	e must be specific and cannot be more than five busin
fective date is listed, the dat	
fective date is listed, the dat or 90 days after the date of fi	
fective date is listed, the dat or 90 days after the date of fi	
ffective date is listed, the date or 90 days after the date of fi	71 51 FT

SHELDON KLEIN

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)