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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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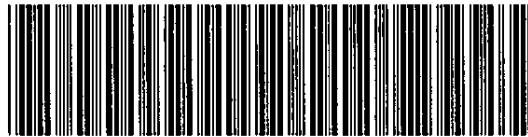
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 MAY 29 AM 11:00
SECRETARY OF REVENUE
TALLAHASSEE, FLORIDA

JUN 01 2015
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2015

RICHARD CRISONINO
2534 SW 6TH ST
MIAMI, FL 33135

SUBJECT: 1811 PARTNERS LLC
Ref. Number: W15000034336

We have received your document for 1811 PARTNERS LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 115A00010173

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

SUBJECT: 1811 PARTNERS LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard A. Crisonino, Esquire
2534 S.W. 6th Street
Miami, FL 33135

For further information concerning this matter, please call:

Richard A. Crisonino at (305) 541-4040

Enclosed is my check in the amount of \$155.00, representing the filing fee, designation of Registered Agent fee, and certified copy fee. Please provide our office with a certified copy of these Articles of Organization.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is 1811 PARTNERS LLC

ARTICLE II - Address:

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

Principal Office address:

8805 Tamiami Trail North-141
Naples, Florida 34108

Mailing address:

8805 Tamiami Trail North -141
Naples, Florida 34108

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

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

Richard A. Crisonino
2534 SW 6th Street
Miami, FL 33134

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 605, F.S.


Richard A. Crisonino, Registered Agent

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TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

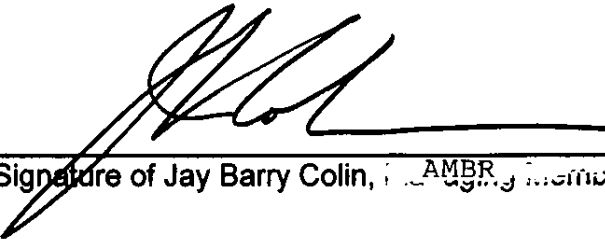
The name and address of the Managing Members are as follows:

Title:

AMBR

Name and address:

Jay Barry Colin
8805 Tamiami Trail North -141
Naples Florida 34108



Signature of Jay Barry Colin, Managing Member

(In accordance with section 605, Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts states herein are true.) I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 817.155 F. S.)

FILED
15 MAY 29 AM 11:00
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA