10/14/2015

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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(((H15000245893 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

: (323)962-8600

Fax Number : (323)962-3889

-\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*

Email Address:

## FLORIDA LIMITED LIABILITY CO.

## 57th Ave Rentals LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

10/13/15 10:04AM PDT '9782231810' -> 13239624521

Pg 2/7

## **COVER LETTER**

TO: Registration Division of C	i Section Corporations				
SUBJECT: .57th A	(a Rentals) I C Name of Lin	nited Liability Company			
The enclosed Articles	of Organization and fee(s) as	re submitted for filing.			
Please return all corre	spondence concerning this m	atter to the following:			
Chevenr	ne Moseley	Name of Person			
i.egalZo	om.com. ino.				
		Firm/Company			
_100 W B	roadway, Suite 100	Address			
Glendale	CA 91210	Siry/State and Zip Code		•	
onlinefilings@k		d for future annual report notifica	ution)	•	
	n concerning this matter, ple				
<u>Chevenne Moseley</u> Ner	at (	973 ) 982-8800 ext 78: Area Code Daytime Te	25 A S S S S S S S S S S S S S S S S S S	<b>15</b> 00T	
Enclosed is a check for	or the following amount:		Ass.	<u> </u>	gran tellegen Eg
□ \$125.00 Filing Fee	□\$130,00 Filing Pcc & Certificate of Status	☑\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	5 PH 9:0	State
Mai	iling Address	Street/Courier Add	5FF		

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

10/13/15 10:04AM PDT '9782231810' -> 13239624521

Pg 3/7

ART	ICLES OF ORG	ANTEATION FOR	FLORIDA LI	MITTED LIABILIT	YCOMPANY	
ARTICLE I - Name: The name of the Limite	d Liability Con	npany is:				
57th Ave Rentals LL	G		·			_
(N	fust end with t	he words "Limite	d Liability Co	ompany, "L.L.C.	," or "LLC.")	
ARTICLE II - Addres The mailing address an		s of the principal	office of the l	imited Liability	Company is:	
Principal Office Addr	वाः		Maiting	Address		
2674 Dick Wilson Dr. Sarasota, FL 34240						<del></del>
(The Limited Liability ( another business entity The name and the Flori	with an active	Florida registrati ss of the registere	on.) d agent are:	Agent 100 musi	—	(vidual or
		Nam.				
	2674 Dick W				<del>-</del>	
	Florida street	address (P.O. Bo	x <u>NOT</u> scoo <sub>i</sub>	otable)		
	Sarasota		FL	34240		
		City		Zip		
Having been named as the place designated capacity. I further as of my duties, and I a	i in this certifica ree to comply w	ate, I hereby acce with the provisions and accept the o	pt the appoint of all statute	ment as registers relating to the p ny position as rej	ed agent and agre proper and compl	e to act in this sie performance
				4		
	The street			<u>/</u>		
	Kegiste	red Agent's Sign Kenneth		IKED)	•	

(CONTINUED) Page 1 of 2

10/13/15 10:04AM PDT '9782231810' -> 13239624521

Pg 4/7

ii.i

Titlet *AMBR* = Authorized Men	Name and Address:
"MGR" = Manager	Kenneth Bueg Revocable Trust Under Agreement Dated September 3, 2015
AMBR	2674 Pick Wilson Dr
	Sarasota, FL 34240
(Use amentment if necessary	
EV: Effective date, if other	than the date of filing: (OPTIONAL) e must be specific and connot be more than five business days prior to or 9
EV: Effective date, if other fective date is listed, the date of filling.)	than the date of filing:, (OPTIONAL) e must be specific and cannot be more than five business days prior to or 9  y.
E V: Effective date, if other ective date is listed, the date of filling.)  E VI: Other provisions, if any REQUIRED SIGNATURE  (In accordance will constitutes an affin I am aware that an	than the date of filing:, (OPTIONAL) e must be specific and cannot be more than five business days prior to or 9  y.
V: Effective date, if other ctive date is listed, the date of filling.)  VI: Other provisions, if any REQUIRED SIGNATURE  (In accordance will constitutes an affir I am aware that an constitutes a third	than the date of filing:

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5,00 Certificate of Status (Optional)

Filing Fees: