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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

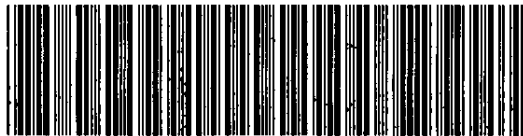
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/07/16--01015--003 \*\*125.00

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 1200 TC 222, 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:

MICHAEL A. FREELING, ESQ.  
Name of Person

BLOOM & FREELING  
Firm/Company

2295 NW CORPORATE BLVD., #117  
Address

BOCA RATON, FLORIDA 33431  
City/State and Zip Code

ADPAKSIMA@ME.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL A. FREELING at ( 561 ) 864-0000  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
New Filing 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:

1200 TC 222, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1200 Town Center Drive, Unit #222  
Jupiter, Florida 33458

1200 Town Center Drive, Unit #222  
Jupiter, Florida 33458

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

C T Corporation System

Name


1200 South Pine Island Road

Florida street address (P.O. Box **NOT** acceptable)

Plantation, Florida 33324  
City State Zip

*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.*

By:

C T Corporation System  
  
Registered Agent's Signature (REQUIRED)

Angel Nunez

Assistant Secretary

(CONTINUED)

Page 1 of 2

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member	
"MGR" = Manager	
<u>AMBR</u>	<u>ALI DAVID PAKSIMA</u>
	<u>1200 Town Center Drive, Unit #222</u>
	<u>Jupiter, Florida 33458</u>

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.  
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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 s.817.155, F.S.

ALI DAVID PAKSIMA

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)

# BLOOM & FREELING

ATTORNEYS AT LAW

2295 NW CORPORATE BOULEVARD • SUITE 117  
BOCA RATON, FLORIDA 33431  
TEL: 561-864-0000 • FAX: 561-864-0001  
E-MAIL: BFLAW@BLOOM-FREELING.COM

JONATHAN BLOOM\*\*  
MICHAEL A. FREELING\*\*

ALSO ADMITTED IN  
\*NEW YORK  
\*CONNECTICUT  
\*WASHINGTON D.C.

June 3, 2016

VIA FEDERAL EXPRESS

New Filing Section  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: New Filing – 1200 TC 222, LLC, a Florida Limited Liability Company

Dear Sir or Madam:

Please find enclosed form cover letter, attorney check no. 3231 made payable to “Florida Department of State, Division of Corporations” in the amount of One Hundred and Twenty Five and 00/100 (\$125.00) Dollars for filing fees. Also enclosed are Articles of Organization for 1200 TC 222, LLC, a Florida limited liability company. Please return a copy/confirmation of the filed articles to: Michael A. Freeling, Esq., Bloom & Freeling, 2295 NW Corporate Boulevard, Ste. 117, Boca Raton, Florida 33431.

Thank you for your assistance herein.

Very truly yours,

  
Michael A. Freeling

MAF/sn

Enc.

cc: Ali David Paksima (via email)

Rina Danielson, CT Corporation System (via email)