L2000/4705S

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Punings Estity Name) |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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International and Domestic Private Client Services ~ Attorneys at Law

May 23, 2020

VIA CERTIFIED MAIL

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Florida 32303

Re:

Articles of Organization Filing-1802 Singer Island

Group, LLC

Dear Sir/Madam:

Enclosed please find one (1) original, plus one (1) copy of the Cover Letter and Articles of Organization for the 1802 Singer Island Group, LLC. Additionally, enclosed please find check number 10586, made payable to the Florida Department of State, in the amount of \$160, which represents the filing fee for articles of Organization and Designation of Registered Agent one (1) Certificate of Status, and one (1) certified copy.

Please return the requested documents to our New Jersey office in the enclosed preaddressed envelope.

Thank you for your prompt attention to this matter. If you have any questions, please do not hesitate to reach me at (908) 898-0100 ext. 108.

Andrea Bruno Chiafullo

Paralegal

Sincerety

McManus & Associates

Enclosures

COVER LETTER

| | 1802 Sing | ger Island Group, | LLC | | | | | |
|--------------|---|-------------------------------------|-----------------|--|---|--|--|--|
| SUBJECT | l': | ger Island Group, No | ıme of Limite | d Liabilit | ty Company | | | |
| | | | | | | | | |
| The enclos | sed Articles o | f Organization and | d fee(s) are su | ıbmitted i | for filing. | | | |
| Please retu | ırn all corresp | ondence concerni | ng this matte | r to the fo | ollowing: | | | |
| | Leslie D. L | evitt, Trustee | | | | | | |
| | | - | 1 | Name of I | Person | | | |
| | Article This | rd Paragraph B Tr | ust under the | Last Wil | I and Testament of E | Eric S. Levitt | | |
| | Firm/Company | | | | | | | |
| | 7 Devonshi | re Road | | | | | | |
| | | | · · · | Addre | SS | | | |
| | Livingston, | New Jersey 0703 | 9 | | | | | |
| | | | City/ | State and | Zip Code | | | |
| | lesliedlevitt@ | | a ha ugad far | 6.1 | mual report notificati | · · · · · | | |
| | | | | | muai report nouncau | ionj | | |
| or jurther i | ntormation co | oncerning this mat | ter, please ca | []; | | | | |
| | Rocco Semi | nerio | 908 at (|) | 898-0100 | | | |
| | Nan | ne of Person | | Code | Daytime Telephon | e Number | | |
| D 1 1: | | | | | | | | |
| | | the following amo | | | | | | |
| □\$125.00 | Filing Fee | □\$130.00 Fili Certificate of \$ | Status | Certified | .00 Filing Fee & d Copy copy is enclosed) | ■\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed | | |
| | | ng Address | | | treet Address | | | |
| | New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | ς. | 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 | y Company is: | | | | |
|--|--|----------------------|-------------------------------------|--|--|
| 1802 Singer Island G | roup, LLC | | | | |
| (Must cona | tin the words "Limited I | Liability Company, | "L.L.C.," or "LLC.") | | |
| ARTICLE II - Address: The mailing address and street ad | ldress of the principal o | ffice of the Limited | Liability Company is: | | |
| <u>Princips</u> | d Office Address: | | Mailing Address: | | |
| 7 Devonshire Road | | 7 De | 7 Devonshire Road | | |
| Livingston, New Jers | ey 07039 | Livi | Livingston, New Jersey 07039 | | |
| another business entity with an a | cannot serve as its own ctive Florida registratio | n.) | You must designate an individual or | | |
| The name and the Florida street a | ddress of the registered | agent are: | | | |
| | Leslie D. Levitt | | | | |
| | | Name | | | |
| | 3800 North Ocean D | rive, #1802 | | | |
| Florida street address (P.O. Box NOT acceptable) | | | | | |
| | Riviera Beach, | Florida | 33404 | | |
| | 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..

Registered Agent's Signature (REOUIRED

(CONTINUED)

ARTICLE IV-

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

| Title: | Name and Address: |
|--|--|
| "AMBR" = Authorized Member "MGR" = Manager | |
| AMBR | Luclia D. Lauitt Taustan |
| 7 CONTRACTOR OF THE PROPERTY O | Leslie D. Levitt, Trustee 7 Devonshire Road |
| | Livingston, New Jersey 07039 |
| | |
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| | |
| | |
| (Use attachment if necessary) | |
| ADDRESS DAY 1200 ST. A. | |
| ARTICLE V: Effective date, if other than the of | date of filing: (OPTIONAL) |
| he date of filing.) | e specific and cannot be more than five business days prior to or 90 days after |
| | ot meet the applicable statutory filing requirements, this date will not be listed a |
| the document's effective date on the Departm | ent of State's records |
| · | on of state 3 records. |
| ARTICLE VI: Other provisions, if any. | |
| | |
| | |
| | |
| REQUIRED SIGNATURE: // | |
| Marie | in A Millian |
| | /)(11 |
| Signature of a | member or an authorized representative of a member. |
| This document is exc | ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. |
| I am aware that any f | false information submitted in a document to the Department of State |
| constitutes a third de | gree felony as provided for in s.817.155. F.S. |
| Leslie D. Lev | itt. Trustee |
| | 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)

2029 HAY 28 PK 1: 41

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