

L05000078631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

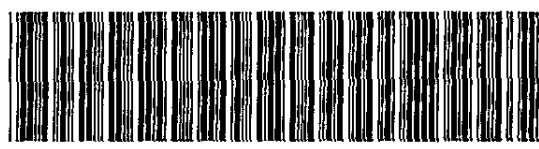
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only	



200057945222

07/28/05--01054--013 **160.00

FILED
2005 AUG 10 P 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

"Corp"

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHAHAMIR CORP., 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:

STEPHEN L. BERKMAN
(Name of Person)

(Firm/Company)

7262 FISHER ISLAND DRIVE
(Address)

MIAMI BEACH, FL. 33109
(City/State and Zip Code)

For further information concerning this matter, please call:

STEPHEN L. BERKMAN at (305) 535-1493
(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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

2005 AUG 10 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 1, 2005

STEPHEN L. BERKMAN
7262 FISHER ISLAND DRIVE
MIAMI BEACH, FL 33109

SUBJECT: SHAHAMIR CORP., LLC
Ref. Number: W05000036291

We have received your document for SHAHAMIR CORP., LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORP.," This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 905A00049627

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SHAHAMIR [REDACTED], 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:

7262 FISHER ISLAND DRIVE
MIAMI BEACH, FL, 33109

SAME

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

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

STEPHEN L. BERKMAN

Name

7262 FISHER ISLAND DRIVE

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

MIAMI BEACH, FL, 33109

City, State, and 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 608, F.S.


Registered Agent's Signature

FILED
2005 JUL 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
57

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

STEPHEN L. BERKMAN
7262 FISHER ISLAND DRIVE
MIAMI BEACH, FL. 33109

MGRM

ROBERTA C. BERKMAN
7262 FISHER ISLAND DRIVE
MIAMI BEACH, FL. 33109

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

STEPHEN L. BERKMAN

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)

2005 AUG 10 P 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED