

## Florida Department of State

Division of Corporations Public Access System

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000144890 3)))



H080001448903ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694 Fax Number: (305)633-9696

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

golf palms apartments, llc

RECEIVED

19 JUN - 4 PM 4: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Electronic Filing Menu

Corporate Filing Menu

Help

1 of 1

N. 9345 mseelUN ee527778002/40/90

6/4/2008 3:33 PM

EWBIBE COBB KIT

1408000144890

# ARTICLES OF ORGANIZATION OF GOLF PALMS APARTMENTS, LLC

#### A FLORIDA LIMITED LIABILITY COMPANY

The undersigned desiring to form a Limited Liability Company under and pursuant to Section 608.404 of the Limited Liability Act, pursuant to Chapter 608 of the Florida Statutes, of the State of Florida, do hereby certify as follows:

FIRST: The name of said Limited Liability Company shall be, GOLF PALMS APARTMENTS, LLC, and the mailing address and the street address of the principal office of the limited liability company shall be 1437 Hayes Street, Hollywood, Florida 33020, and the street address of the principal office of the limited liability company shall be: 1437 Hayes, Street, Hollywood, Florida 33020

SECOND: GOLF PALMS APARTMENTS, LLC shall have a perpetual duration from the date of filing of these Articles of Organization.

THIRD: The purposes for which, GOLF PALMS APARTMENTS, LLC is formed are:

- (A) to purchase, sell Real Estate, distribute, invest in, and otherwise deal with a variety of products and services within and outside the State of Florida as agent for any parent companies, subject to such laws and regulations governing licensing and other requirements pertinent thereto, on its own account and for the accounts of others; and penetrate new markets
- (B) to engage in such other lawful acts or activities for which limited liability companies may be formed under Chapter 608 of the Statutes of the State of Florida.

FOURTH: The maximum number of ownership units which, GOLF PALMS APARTMENTS, LLC is authorized to have outstanding is one hundred (100), all of which shall be identical units, and each of which shall represent the ownership of that percentage of the total units outstanding at any time as is the equivalent of the ratio in which one (1) is the numerator and the total units outstanding is the denominator.

FIFTH: This limited liability company shall be manager-managed and will have one manager, SEBASTIAN HORACIO PAPPALETTERA.

H08000144890

SIXTH: The name and mailing address of the company's registered agent is OSCAR GRISALES-RACINI, PA, whose mailing address is 2999 NE 191 STREET, PH8, AVENTURA, FLORIDA 33180

IN WITNESS WNEREOF, I have hereunto subscribed my name this 4 day of 12008.

SEBASTIAN HORACIJA PARBALETTERA

# 408000144890

#### DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT

Pursuant to the provisions of Florida Statutes, the undersigned limited liability Company organized under the laws of the State of Florida submits the following statement in designating the registered office/registered agent in the State of Florida.

- The name of the limited liability company is GOLF PALMS APARTMENTS, LLC
- The name of the registered agent is OSCAR GRISALES-RACINI, PA
- The address of the registered agent/registered office is 2999 NE 191 STREET, PH8, AVENTURA, FLORIDA 33180

#### Acceptance

Having been named as registered agent and designated to accept service of process for the above limited liability company, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision 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.

By:

For the Company

Date:

4/4/08

SECREJARY OF STATE