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Office Use Only

B. KOHR

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**EXAMINER** 



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EXAMINER

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062. • Fax (850) 222-1222

	. •
Joe Di Maggio Building, LCC	OB AUG 13 PM 4: 15
	Art of Inc. File  LTD Partnership File  Foreign Corp. File  L.C. File  Fictitious Name File
Thank you!	Trade/Service Mark  Merger File  Art. of Amend. File  RA Resignation  Dissolution / Withdrawal  Annual Report / Reinstatement
	Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name
Signature	Corp Record Search Officer Search Fictitious Search Fictitious Owner Search Vehicle Search
Requested by:  Name  Date  Time	Driving Record  UCC 1 or 3 File  UCC 11 Search

UCC 11 Retrieval

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
JOE DIMAGGIO (Must end with the words "Limited	DBUILDING, LLC Liability Company." "L.L.C" or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
4040 Sheridan Street Hollywood, Florida 33021	4040 Sheridan Street Hollywood, Florida 33021	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another	
The name and the Florida street address of	the registered agent are:  ELBERG, ESQUIRE  Name  neridan Street  (P.O. Box NOT acceptable)  FL 33021 late, and Zip	
MORRIS ENGI	ELBERG, ESQUIRE	
, n	Name E E	
4040 Sh	neridan Street	
	(P.O. Box NOT acceptable)	
Hollywood	77021	
	FL 33021	
Having been named as registered agent an liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple	and to accept service of process for the above stated limited of in this certificate. I hereby accept the appointment as pacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S	

(CONTINUED)

#### Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Membe	Pr	
MOIGHT - Manuaging Michiga	vi	
MGR	Morris Engelberg, Esquire	
	4040 Sheridan Street	
	Hollywood, Florida 33021	
MGRM	Dids & Da Limited Partnership	
	4040 Sheridan Street	
	Hollywood, Florida 33021	
•		
CLE V: Effective date, if other the fective date is listed, the date is days after the date of filing.)  REQUIRED SIGNATURE:	han the date of filing: August 12, 2009. (OPTIONAL) must be specific and cannot be more than five business days prior	
	member or an authorized representative of a member.	
of this docume	e with section 608.408(3), Florida Statutes, the execution ent constitutes an affirmation under the penaltics of perjury stated herein are true.)	
DIDS & DA	LIMITED PARTNERSHIP, a Florida limited partnership	
By: DIDS	G DA ENGELBERG INC. General Partner	
Files Form By: Morris	Typed or printed name of flower	
Finne Fees:	E DA ENGELBERG INC. General Partner Typed or printed name of signee s Engelberg, President	
\$125.00 Filing Fee for Articles	Typed or printed name of signees s Engelberg, President of Organization and Designation	
	of Organization and Designation	

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