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FILED
2014 APR 29 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
APR 30 2014



CORPORATION SERVICE COMPANY'

ACCOUNT NO. : I20000000195

REFERENCE : 111584 7518930

AUTHORIZATION : *[Handwritten signature]*

COST LIMIT : \$ 125.00

ORDER DATE : April 29, 2014

ORDER TIME : 12:17 PM

ORDER NO. : 111584-005

CUSTOMER NO: 7518930

DOMESTIC FILING

NAME: SFA 323 SUNNY ISLES BLVD LLC

EFFECTIVE DATE:

☐ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP
☒ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: _____

SFA 323 SUNNY ISLES BLVD LLC

323 Sunny Isles Blvd., Unit #2,
Sunny Isles Beach, Florida 33160

TO: Registration Section
Division of Corporations

SUBJECT: SFA 323 SUNNY ISLES BLVD LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sameh Elashry
323 Sunny Isles Blvd.,
Unit #2,
Sunny Isles Beach, Florida 33160
samehelashry@gmail.com

For further information concerning this matter, please call:

Sameh Elashry at 1-917-609-2444

Enclosed is a check for the following amount: \$125.00 filing fee.

FILED

2014 APR 29 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I: The name of the Limited Liability Company is: **SFA 323 SUNNY ISLES BLVD LLC**

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

Principal Office Address:

323 Sunny Isles Blvd.,
Unit #2,
Sunny Isles Beach, Florida 33160

Mailing Address:

323 Sunny Isles Blvd.,
Unit #2,
Sunny Isles Beach, Florida 33160

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

Sameh Elashry
323 Sunny Isles Blvd.,
Unit #2,
Sunny Isles Beach, Florida 33160

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.


Sameh Elashry, Registered Agent

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

Title:

AMBR and MGR

Name and Address:

Sameh Elashry
323 Sunny Isles Blvd.,
Unit #2,
Sunny Isles Beach, Florida 33160

ARTICLE V: The effective date of this certificate is the date of filing.

ARTICLE VI: The purpose of the Limited Liability Company is to engage in any lawful act or activity for which limited liability companies may be organized under the Florida Statutes.

REQUIRED SIGNATURE:


Sameh Elashry, Managing Member

In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

SFA 323 SUNNY ISLES BLVD LLC