

L00000001858

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To:  
Division of Corporations  
Fax Number : (850) 922-4003

From:  
Account Name : EMPIRE CORPORATE KIT COMPANY  
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**LIMITED LIABILITY COMPANY**

**DENUNZIO & BOLTWOOD ENTERPRISES, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

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FEB-18-2000 14:20

EMPIRE CORPORATE KIT

P.02/03



**FLORIDA DEPARTMENT OF STATE**  
**Katherine Harris**  
**Secretary of State**

February 18, 2000

EMPIRE CORPORATE KIT COMPANY

SUBJECT: DENUNZIO & BOLTWOOD ENTERPRISES, LLC  
REF: W00000004267

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Agnes Lunt  
Document Specialist

FAX Aud. #: H00000007252  
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - NAME:****H00000007252**

The name of the Limited Liability Company is: **DENUNZIO & BOLTWOOD ENTERPRISES, LLC**

**ARTICLE II - ADDRESS**

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

**1000 N. HIATUS ROAD  
SUITE 110  
PEMBROKE PINES, FLORIDA 33026**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:**

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

**Ross Trager, P.A.  
1000 N. Hiatus Road, Suite 110  
Pembroke Pines, FL 33026**

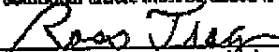
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all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

**ARTICLE IV - Management (Check box if applicable.)**

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

  
\_\_\_\_\_  
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.)

**Ross Trager, P.A.**  
\_\_\_\_\_  
Typed or printed name of signer

**FILING FEES:**  
\$100.00 Filing Fee for Articles of Organization  
\$25.00 Designation of Registered Agent  
\$30.00 Certified Copy (Optional)  
\$5.00 Certificate of Status (Optional)

**H00000007252**