

L00000003442

ATTORNEY AT LAW  
CONCOURSE PLAZA  
SUITE 616

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BAY HARBOR ISLANDS, FLORIDA 33154  
FAX (305) 866-3159  
(305) 864-9934

February 4, 2000

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fla. 32314

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-02/14/00--01005--020  
\*\*\*\*155.00 \*\*\*\*155.00

Re: **The Herbits Group, LLC**

Dear Madam Secretary,

Enclosed herewith please find two (2) original Articles of Organization of **The Herbits Group, LLC** for filing, along with my trust account check in the sum of \$155.00 for filing and for returning a **certified copy** of the Articles. Thank you.

Very truly yours,

MARC HAUSER

MH:cs  
Encl.

#26:herbitslg.ltr

11-11-11  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

February 21, 2000

MARC HAUSER  
111 KANE CONCOURSE  
SUITE 616  
BAY HARBOR ISLANDS, FL 33154

SUBJECT: THE HERBITS GROUP, LLC  
Ref. Number: W00000004740

We have received your document for THE HERBITS GROUP, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

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) 487-6043.

Shawn Logan  
Document Specialist

Letter Number: 200A00009207

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**THE HERBITS GROUP, LLC**

**ARTICLE II - Address:**

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

1000 VENETIAN WAY (#904)  
Miami Beach, Fla. 33140

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

Perpetual

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by a manager or managers and the name and address of such manager who is to serve as manager is:

STEPHEN E. HERBITS  
1000 Ventian Way (#904)  
Miami Beach, Fla. 33140

The Limited Liability Company is to be managed by the members and the names and addresses of the managing members is:

HERBERT JULI  
5 ISLAND AVE (#7-H)  
Miami Beach, Fla. 33139

**ARTICLE V - Admission of Additional Members:**

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

None

**ARTICLE VI - Members Rights to Continue Business**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a membership of a member in the limited liability company shall be in accordance with the law,

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TALLAHASSEE, FLORIDA

The undersigned member or authorized representative of a member of STEPHEN E. HERBITS, LLC

1) the above named limited liability company has a Manager and a member, and is a manager-managed company.

*Stephen E. Herbits*

**STEPHEN E. HERBITS      MANAGER**

(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.)

STATE OF FLORIDA      ) SS:  
COUNTY OF Miami-Dade )

Be it known that on the 4 day of February, 2000 before me, a Notary Public in and for the State of Florida duly commissioned and sworn personally came and appeared STEPHEN E. HERBITS to me (x) personally known ( ) who presented as I.D.: who did take an oath, and known to me to be the same person described in and who executed the foregoing instrument and he acknowledged the within to be his act and deed and that an oath was taken.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed my seal of office the day and year last above written.

My Commission No. \_\_\_\_\_  
Expires \_\_\_\_\_ NOTARY PUBLIC, State of FLORIDA

(Seal) Marc Hauser  
Printed Name of Notary



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. the name of the limited liability company is:

STEPHEN E. HERBITS, LLC

2. The name and address of the registered agent and office is:

STEPHEN E. HERBITS  
(Name)

1000 VENETIAN WAY (#904)  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Miami Beach, Fla. 33139  
(City/State/Zip)

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TALLAHASSEE, FLORIDA

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.

  
STEPHEN E. HERBITS

2/4/00  
(Date)

**Filing Fee: \$35 for Designation of Registered Agent**