Form 1

# L00000015693

Transmittal Letter

MJH

Department of State		æ	all car
Division of Corporations		<u>:</u>	30000350
P.O. Box 6327	÷	<del>-</del> .	-12/15/00 ****125.1
Tallahassee, FL 32314			- indicates a green wa

SUBJECT: Dyen Apartments LLC

(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$100.00 Filing fee for Articles of Organization \$25.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$5 if a certificate of status is needed. The fee for a certified copy is \$30. Please send one check for the total amount made payable to the Florida Department of State.

FROM:	LIND, T. DYER	000014
	Name (Printed or typed)	R
-	2660 Tecumseh Drive Address	SHALENS L: 01
	West Palm Beach, Florida	
-	City, State & Zip	
	561-686-38 77	<del></del>
	Daytime Telephone number	

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Dyen Apartments LLC

#### **ARTICLE II - Address:**

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

2660 Teamseh Drive West Palm Beach, Florida 33409

**ARTICLE III - Registered Agent** 

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

LINDJI, DyER 2660 Tocomseh Drive WPB FLorida 33409

**ARTICLE IV - Management:** 

(Check the appropriate box)

☐ The Limited Liability Company is to be a manager-managed company. The Limited Liability Company is to be managed by the members.

OD DEC 14 PM 4: 01

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

Filing Fee: \$100.00 for Articles

## 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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited	l liability company is:	Dyer	Apartment	s LLC
2. The name and the Flori	da street address of the re	egistered agen	it are:	
	LIND, T. Dyer	ME	<del> </del>	en e
	Florida street address (P.O.	nsch De Box <u>NOT</u> ACCEP	TABLE)	
<u>w</u> a	st Palm Beach FI CITY, STAT		409	

Having been names as registered agent and to accept service of process for the above stated; limited l; liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Filing Fee: \$25 for Designation of Registered Agent