Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations \tag{Fax Number : (850)922-4003

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone Fax Number : (305)634-3694 : (305)633-9696

LIMITED LIABILITY COMPANY

THE REAL ESTATE GROUP, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00



(A)	ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	7
<u>ن</u>	ARTICLE I - Name:	_
7	The name of the Limited Liability Company is:	
	The Real Estate Grap, LCC.	
A	ARTICLE II - Address:	
7	The mailing address and street address of the principal office of the Limited Liability Company is:	
	The Real Estate Group, LCC. 2,000 HUNTER ROAD, WESTON FLORIDA 2333; ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:	
	2800 HUNTER ROAD	
Δ	PUTCIETT PASSESSED WESTON FLORIDA 23331	
2.	acticold dit - Registered Agent, Registered Office, & Registered Agent's Signature:	
T	he name and the Florida street address of the registered agent arc:	
	RAQUEL L- CHERRY	
	5308 NW Name 126th DC	
	Florida surest address (P.O. Box NOT acceptable)	
	Coral Springs FI, 33376 City, State, and Zip	
2 8 6	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 some pharefore a manager or more managers.	,
,	therefore, a manager - managed company. APR APR (An additional afficle must be added if an effective date is requested)	
	Signature of a member or an authorized representative of a member.	_
	$m_{ m c}$	
	(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.)	
	RAQUEL CHERKY	
	Typed or printed name of signee	
	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)	