



# L010000019458

ACCOUNT NO. : 072100000032

REFERENCE : 378267 7137273

AUTHORIZATION : *Patricia Pizito*

COST LIMIT : \$ 125.00

ORDER DATE : November 9, 2001

ORDER TIME : 1:15 PM

ORDER NO. : 378267-005

CUSTOMER NO: 7137273

CUSTOMER: Eric M. Sauerberg, Esq  
Eric M. Sauerberg, P.A.

Suite 102  
200 Village Square Crossing  
Palm Bch Garden, FL 33410

DOMESTIC FILING

NAME: CFISHC, LLC

EFFECTIVE DATE:

500004674545--6

☐ 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: Betty Young - EXT. 1112

EXAMINER'S INITIALS: *YB*

RECEIVED  
01 NOV -9 PM 2:37  
DIVISION OF CORPORATION

APPROVED  
FILED  
01 NOV -9 PM 3:53  
STATE OF FLORIDA  
DIVISION OF CORPORATION

**ARTICLES OF ORGANIZATION OF  
CFISHC, LLC**

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

**ARTICLE I**

The name of this limited liability company is CFISHC, LLC

**ARTICLE II**

This limited liability company shall have perpetual existence from the effective date of filing these Articles with the Department of State unless sooner terminated as provided in the Operating Agreement.

**ARTICLE III**

The mailing address and street address of the principal place of business of this limited liability company is 618 Shore Road, North Palm Beach, Florida 33408. This limited liability company may, at its discretion, change the address of its principal place of business.

**ARTICLE IV**

The name and street address of the initial registered agent of this limited liability company is Eric M. Sauerberg, 200 Village Square Crossing, Suite 102, Palm Beach Gardens, Florida 33410.

**ARTICLE V**

The management of this limited liability company shall be vested in the manager or managers and is, therefore, a manager-managed company.

**ARTICLE VI**

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the manager.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this 15 day of

November, 2001.

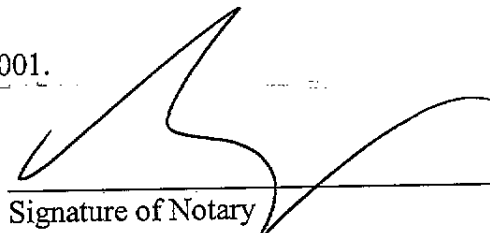
  
Martha Fisher Powell, Member

RECEIVED  
NOV 15 9 PM 3:53  
STATE OF FLORIDA  
DEPARTMENT OF STATE

STATE OF FLORIDA       )  
                                      )  
COUNTY OF PALM BEACH    )

The foregoing instrument was acknowledged before me this 5<sup>th</sup> day of November, 2001,  
by Martha Fisher Powell who is personally known to me or who has produced Florida State Driver's  
License Number 71A as identification and who did ( ) or did not (✓)  
take an oath.

Executed this 5<sup>th</sup> day of November, 2001.

  
\_\_\_\_\_  
Signature of Notary  
Printed Name:  
My Commission Expires:  
My Commission Number:

 Eric M Sauerberg  
My Commission CC813382  
Expires March 1, 2003

01 NOV - 9 PM 3:52  
CLERK OF COURT  
PALM BEACH COUNTY  
FLORIDA

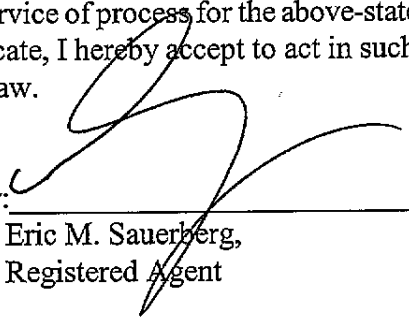
**CERTIFICATE DESIGNATING REGISTERED  
OFFICE FOR THE SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT  
UPON WHOM PROCESS MAY BE SERVED**

Pursuant to Chapter 608.415 and Chapter 608.507 Florida Statutes, the following is submitted:

That CFISHC, LLC, a Florida Limited liability company, with its registered office at 200 Village Square Crossing, Suite 102, Palm Beach Gardens, Florida 33410, has named Eric M. Sauerberg at such address as its initial registered agent to accept service of process within this State.

**ACKNOWLEDGMENT:**

Having been named registered agent to accept service of process for the above-stated limited liability company at the place designated in this Certificate, I hereby accept to act in such capacity and agree to comply with the applicable provisions of law.

By:   
Eric M. Sauerberg,  
Registered Agent

STATE OF FLORIDA     )  
                                          )  
COUNTY OF PALM BEACH     )

The foregoing instrument was acknowledged before me this 5<sup>th</sup> day of November, 2001, by Eric M. Sauerberg, who is personally known to me or who has produced Florida State Driver's License Number 216 as identification and who did ( ) or did not (X) take an oath.

Executed this 5<sup>th</sup> day of November, 2001.

  
Signature of Notary

Printed Name:

My Commission Expires:

My Commission Number:

