

LO20000000743

TRANSMITTAL LETTER forms

fees \$125
00789-02827-00676-00524-00671
\$65 short

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

MJH W01-28374

400004715784--3
-12/10/01--01043--015
*****70.00 *****70.00

1/9

SUBJECT: MOVSOVITZ FAMILY LLC
(Proposed Corporate Name)

2cc
2cus

Enclosed is an original and (1) copy of the Articles of Incorporation and our check
for \$ 70.00.

400004715784--3
-01/10/02--01001--011
****125.00 ****125.00

FROM: LARRY MOVSOVITZ
571 PONTE VEDRA BLVD.
PONTE VEDRA BEACH, Florida 32082

Note: Please provide the original and one copy of the Articles.

FILED
02 JAN - 9 PM 4: 37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

December 12, 2001

LARRY MOVSOVITZ
571 PONTE VEDRA BLVD.
PONTE VEDRA BEACH, FL 32082

SUBJECT: MOVSOVITZ FAMILY LLC
Ref. Number: W01000028374

We have received your document for MOVSOVITZ FAMILY LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$55.00.

You must complete the attached forms to file an LLC, the forms submitted are for a Corporation.,

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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 101A00065368

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: MOVSOVITZ Family LLC

ARTICLE II - Address:

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

571 Ponte Vedra Blvd., Ponte Vedra Bch, FL
32082

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

LARRY MOVSOVITZ
571 PONTÉ VEDRA BLVD
Name
Florida street address (P.O. Box **NOT** acceptable)
PONTÉ VEDRA BCH FL 32082
City, State, and Zip

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..

[Signature]
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.

[Signature]
(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.)

LARRY MOVSOVITZ
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)

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