

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

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000047758 6)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146

Phone : (305) 444-4994

Fax Number

: (305)444-4977

LIMITED LIABILITY COMPANY

STANTON-PENDER, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155,00

t Department of State 3/4/2002 10:48 PAGE 1/1 RightFAX



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 4, 2002

EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: STANTON-PENDER, LLC

REF: W02000006033

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain both the street address of the principal office and the mailing address of the entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt

FAX Aud. #: H02000047758

Document Specialist

CORPORNATION

MAR -4 PH 12: 30

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Stanton-Pender, LLC

ARTICLE II - Address: The mailing address and street address of the principal office of the

Limited Liability Company is:

19333 COLLINS AVENUE #1403 SUNNY ISLES, FL 33160

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

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

Saui Levy Name	. . .	
19333 Collins Avenue # 1403 Florida street address (P.O. Box NOT acceptable)	-	· <u> </u>
Sunny Isles, Florida 33160 City, Smie, and Zip Code		-

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 Apent'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 of a member or authorized representative of a member)

(in accordance with section 608.408(3), Florida Statutes, the execution of this document emissiones an affirmation under the penaltics of perjuty that the facts stated herein are true.)

Spul Levy
Typed or printed name of signee

MAR -4 PM 3: