

AUG. 1.2002 3:03PM  
Division of Corporations

BECKER & POLIAKOF

NO. 153

P. 1/2  
Page 1 of 2

**LU2000019561**

Florida Department of State  
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.**

(((H02000175116 1)))

**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 : BECKER AND POLIAKOFF, P.A.  
Account Number : 072720000214  
Phone : (954)364-6007  
Fax Number : (954)985-4138

**BK**

**LIMITED LIABILITY COMPANY**

**B&P Ft. Myers Office, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

FILED  
02 AUG -1 PM 3:13  
TALLAHASSEE, FLORIDA  
DIVISION OF STATE

RECEIVED  
02 AUG -1 PM 3:20  
DIVISION OF CORPORATION

H02000175116 1

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is: B&amp;P Ft. Myers Office, LLC

**ARTICLE II - Address:**

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

3111 Stirling Road, Ft. Lauderdale, Florida 33312

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

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

Gary Pollakoff

Name

3111 Stirling Road

Florida street address (P.O. Box **NOT** acceptable)

Ft. Lauderdale, Florida 33312

City, State, and Zip

02 AUG -1 PM 3:13  
RECEIVED  
SECRETARY OF STATE  
ALLAHASSEE, FLORIDA

*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 is, therefore, a manager - managed company.

(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.)

Gary Pollakoff

Typed or printed name of signee

Robert J. Burnett, Esq.  
 Becker & Poliakoff, P.A.  
 3111 Stirling Road  
 Ft. Lauderdale, FL 33312  
 FL Bar #0117978

(954) 364-6007

**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)

H02000175116 1