1020000 30645

	} ,,
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
1 . H	
189, 623, 671	
Office Use Only ND2-3619	
MOD - 3	



000008684890

11/04/02-01044-014 **160.00





FLORIDA DEPARTMENT OF STATE

Jim Smith Secretary of State

November 5, 2002

JOSEPH H. PEREZ 2100 NW 99TH AVENUE MIAMI, FL 33172

SUBJECT: ZEREP PROPERTIES LLC

Ref. Number: W02000031679



We have received your document for ZEREP PROPERTIES LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 602A00060415

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE I-Name: he name of the Limited Liability Company is: ZEREP PROPERTIES LLC
RTICLE II - Address: the mailing address and street address of the principal office of the Limited Liability Company is: 2100 NW 99 th Avenue Mami, FL 33472
RTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
he name and the Florida street address of the registered agent are:
Joseph H. Ricez
Name
Plonida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
Miam: FL 33172 City, State, and Zip
City, State, and Zip
lability company at the place designated in this certificate, I hereby accept the appointment as egistered agent and agree to act in this capacity. I further agree to comply with the provisions of all latutes 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 us provided for in Chapter 608, F.S.
(An additional article must be added if an effective date is requested).
Signature of Amember or an authorized representative of a mamber.
(In accordance with section 608.408(3), Florida Sistuaca, the execution of this document constitutes an affirmation under the penalties of perjumpthat that the facts stated herein are true.)
Joseph H. Ferez 57
Filing Feen: \$109.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Ootlenal)