

103000002536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies

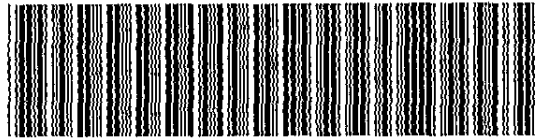
1

Certificates of Status

Special Instructions to Filing Officer:

1/22 FULL CC

Office Use Only



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01/22/03--01078--024 **155.00

RECEIVED
03 JAN 22 PM 12:08
STATE OF FLORIDA
DIVISION OF REVENUE
TALLAHASSEE, FLORIDA

FILED
03 JAN 22 PM 1:48
STATE OF FLORIDA
DIVISION OF REVENUE
TALLAHASSEE, FLORIDA

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/St/Zip

850-222-2785

Phone #

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- COMMERCIAL PROPERTY INVESTMENTS, LLC

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF ORGANIZATION
OF
COMMERCIAL PROPERTY INVESTMENTS, LLC

1. NAME:

The name of the limited liability company is COMMERCIAL PROPERTY INVESTMENTS, LLC

2. PERIOD OF DURATION:

The period of its duration Shall be perpetual.

3. PRINCIPAL PLACE OF BUSINESS:

The street and mailing address of the company's place of business is:

5975 West Sunrise Boulevard - Suite 216
Sunrise, FL 33313

4. REGISTERED AGENT AND REGISTERED OFFICE:

The name of the agent and address of the registered office is:

Mr. Daniel Dammyer
5975 West Sunrise Boulevard - Suite 216
Sunrise, FL 33313

5. RIGHT TO ADMIT ADDITIONAL MEMBERS:

Members are given the right to admit new members, upon a seventy-five (75%) percent vote of the existing members and approval of the Manager.

6. RIGHT TO CONTINUE LIMITED LIABILITY COMPANY:

This Limited Liability Company shall not be dissolved in the event of the death, withdrawal, resignation, expulsion, bankruptcy or dissolution of a member, or occurrence of any other event that terminates the continued membership of a member and shall continue its existence as a limited liability company.

7. MANAGEMENT:

Steven L. Siems
5975 West Sunrise Boulevard
Sunrise, FL 33313

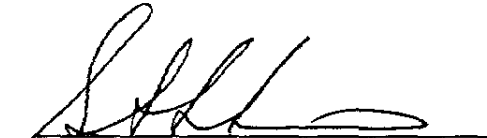
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TALLAHASSEE
FL
SDBA

8. THE ORGANIZERS ARE:

Name and address of organizer:

Steven ^{L.}Siems
5975 West Sunrise Boulevard SUITE 216
Sunrise, FL 33313

The undersigned organizer has executed these Articles of Organization this 15th day of January, 2003.


STEVEN SIEMS
^{L.}

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

I hereby accept my appointment as registered agent for COMMERCIAL PROPERTY INVESTMENTS, LLC. As registered agent I am familiar with, and accept, the obligations of this position.

DATE: 1/15/2003


Daniel Dammyer/Registered Agent


STATE OF FLORIDA)

SS:

COUNTY OF BROWARD)

Before me, the undersigned Notary, on this day personally appeared Daniel Dammyer, whose name is subscribed to the foregoing instrument, and acknowledged to me that he executed the same for the purposes and consideration therein expressed, and in the capacities stated.

GIVEN UNDER MY HAND AND SEAL OF OFFICE on this 15 day of January, 2003.


NOTARY PUBLIC

My Commission Expires:



Cynthia Heiss
Commission # CG 841793
Expires June 1, 2003
Bonded Thru
Atlantic Bonding Co., Inc.