# 

# Florida Department of State

Division of Corporations Public Access System

#### 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.

(((H03000090629 4)))

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 : GERALD S. LESHER Account Number : I19990000219 Phone : (561)471-7155

Fax Number

ix Number : (561)471-8055

RECEIVED 3 MAR 25 PM 2: 3 ISION OF CORPORAL

# LIMITED LIABILITY COMPANY

HALLAND COMPANY OF SOUTH FLORIDA L.L.C.

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

03 M/R 25 PH 3: 00

325 C

3/25/03

#### H0300000000406244 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I-NAME

The name of the Limited Liability Company is: HALLAND COMPANY OF SOUTH FLORIDA L.L.C.

#### ARTICLE II-ADDRESS

The mailing address and the street address of the principal office of the Limited Liability Company is: 339 W. CAMINO GARDENS BLVD, SUITE 300 BOCA RATON FL 33432

# ARTICLE III-REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE:

The name and street address of the registered agent are: Gerald S. Lesher Esq. 1555 Palm Beach Lakes Blvd Suite 1510 West Palm Beach Florida 33401

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, I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT, AS PROVIDED FOR THE GOS, FLORIDA STATUTES.

REGISTERED AGENT'S NAME

### ARTICLE IV-MANAGEMENT (CHECK IF APPLICABLE)

\_x\_\_ THE Limited Liability Company is to be managed by one or more managers and is therefore, a manager-managed company

(IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTY OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE)

TYPE OR PRINTED NAME OF SIGNEE

GERALD S. LESHER.

H030000906294

HMR 25 PH 3: 00