

L03000023/54

03 JUN 23 PM 1:21

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

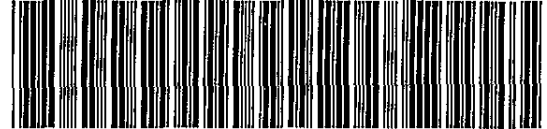
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W03-16883
AL1

Monday, June 02, 2003

FILED
03 JUN 23 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Enclosed please find Articles of Organization for South Florida Property Investors, LLC. Should any additional information be needed to complete the registration of this LLC, I may be reached at:

1457 Sabal Trail
Weston, FL 33327

1-954-217-7161

Sincerely,



James Anderson

Encl.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 12, 2003

JAMES ANDERSON
1457 SABAL TRAIL
WESTON, FL 33327

SUBJECT: SOUTH FLORIDA PROPERTY INVESTORS, LLC
Ref. Number: W03000016883

We have received your document for SOUTH FLORIDA PROPERTY INVESTORS, LLC and your check(s) totaling \$125.00. 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) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 203A00036522

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SOUTH FLORIDA PROPERTY INVESTMENTS, LLC

FILED

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

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

1457 SABAL TRAIL WESTON, FL 33327

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

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

JAMES ANDERSON

Name

1457 SABAL TRAIL

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

WESTON

FL

33327

City, State, and Zip

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.

[Signature]

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

[Signature]

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.)

JAMES ANDERSON

Typed or printed name of signer

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)