

L030000027983

(Requestor's Name)

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(Address)

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☐ PICK-UP

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07/28/03--01051--021 **25.00

07/17/03--01017--007 **135.00

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2003 JUL 30 PM 4:19
TALLAHASSEE, FLORIDA

W03-20544

J. BRYAN JUL 30 2003

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OUR FAMILY REAL ESTATE INVESTORS, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JON P. PEPE

(Name of Person)

OUR FAMILY REAL ESTATE INVESTORS, LLC

(Firm/Company)

2741 NE 23RD PLACE

(Address)

POMPANO BEACH, FL 33062

(City/State and Zip Code)

For further information concerning this matter, please call:

JON P. PEPE

(Name of Person)

at

(954)

205-7151

EVENING PHONE

OR

954-786-2048

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399



MAILING ADDRESS:

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

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 18, 2003

JON P. PEPE
OUR FAMILY REAL ESTATE INVESTORS, LLC
2741 NE 23RD PLACE
POMPANO BEACH, FL 33062

SUBJECT: OUR FAMILY REAL ESTATE INVESTORS, LLC
Ref. Number: W03000020544

We have received your document for OUR FAMILY REAL ESTATE INVESTORS, LLC and your check(s) totaling \$135.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 203A00042330



July 25, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Subject: Inaccurate Payment On My Part – Balance Due of \$25
Reference Number: W03000020544

Joey Bryan

Please see enclosed payment of \$25 for balance due for the filing of Our Family Real Estate Investors, LLC.

If you have any questions or concerns, please do not hesitate to contact me.

Sincerely,

Jon P. Pepe
President/Private Real Estate Investor

Enclosure: Check for \$25, copy of letter sent to me for mistake

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: OUR FAMILY REAL ESTATE INVESTORS, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2741 NE 23RD PLACE
POMPANO BEACH, FLORIDA 33062

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

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

Jon P. PEPE
Name
2741 NE 23RD PLACE
Florida street address (P.O. Box NOT acceptable)
POMPANO BEACH FL, 33062
City, State, and Zip

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OFFICE OF CORPORATIONS
TALLAHASSEE, 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..

Jon P. Pepe
Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

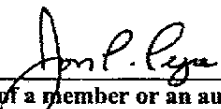
Name and Address:

<u>MGRM</u>	<u>Jon P. PEPE</u>
	<u>2741 NE 23RD PLACE</u>
	<u>POMPANON BEACH, FL 33062</u>
<u>N/A</u>	<u>BLANK - N/A</u>
<u>N/A</u>	<u>BLANK - N/A</u>
<u>N/A</u>	<u>BLANK - N/A</u>

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED 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.)

Jon P. PEPE

Typed or printed name of signee

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)

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J. J. JONES CORPORATION
TALLAHASSEE, FLORIDA