

L03000035655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

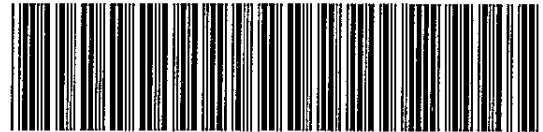
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900022870779

09/16/03--01030--003 **125.00

RECEIVED
SEP 16 2003
FILING OFFICE
ALBANY, NY

L03-35655
OR

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DELRAY PARTNERS 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:

LEE M. SMALL
(Name of Person)

DEPENDABLE TRUSTEE SVCS
(Firm/Company)

7701 N.W. 56TH AVE #2
(Address)

POMPANO BEACH, FL 33073
(City/State and Zip Code)

For further information concerning this matter, please call:

LEE M. SMALL at (954) 422-1738
(Name of Person) (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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DELRAY PARTNERS 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:

7701 NW 56TH AVE #2
POMPANO BEACH, FL
33073

(SAME)

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

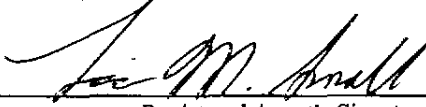
The name and the Florida street address of the registered agent are:

LEE M. SMALL
Name

22083 FLOWER DRIVE
Florida street address (P.O. Box **NOT** acceptable)

POMPANO BCH FL 33428
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..


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:

MGRM

DEBORAH SMALL
7701 NW 56TH AVE #2
POMPANO BEACH, FL 33073

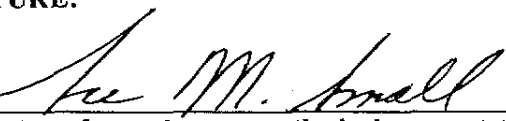
MGRM

PATRICK BOWEN
1109 NE 2nd AVE
DEER BEACH, FL 33444

(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.)

LEE M. SMALL

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)