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HUNGE CORPORATIONS
TALLAHASSEE, FLORIDA

W03-39065
J. BRYAN DEC 23 2003

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FAIRMANS 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:

PAUL R. FAIRMAN
(Name of Person)

FAIRMANS LLC
(Firm/Company)

5281 AVOCADO AVE.
(Address)

COCOA, FL. 32926
(City/State and Zip Code)

For further information concerning this matter, please call:

PAUL R. FAIRMAN at (321) 609-9044
(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

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

December 23, 2003

PAUL R. FAIRMAN
FAIRMANS LLC
5281 AVOCADO AVE.
COCOA, FL 32926

SUBJECT: FAIRMANS LLC
Ref. Number: W03000039065

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for FAIRMANS LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

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

Joey Bryan
Document Specialist

Letter Number: 803A00068460

FAIRMANS

634-8418/2870
4864545004

DATE: 1-22-04

PAY TO THE ORDER OF: Dept. of State \$125

One Hundred Twenty Five DOLLARS

Washington Mutual

Washington Mutual Bank, FA
Cocoa Commons Financial Center 311
2501 State Road 524, Ste 100
Cocoa, FL 32926 1-800-755-7000
24 Hour Customer Service

NOTES: LLC loaner

2670841310 4864545004 0331

REF # W03000039065

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

FAIRMANS LLC

ARTICLE II - Address:

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

Principal Office Address:

FAIRMANS

5281 AVOCADO, AVE.

COCOA, FL. 32926

Mailing Address:

FAIRMANS

5281 AVOCADO, AVE.

COCOA, FL. 32926

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

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

PAUL R. FAIRMAN

Name

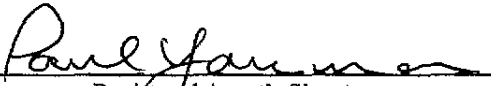
5281 AVOCADO, AVE.

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

COCOA, FLORIDA 32926

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, Florida Statutes..



Registered Agent's Signature

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:

MGR

PAUL R. FAIRMAN

5281 AVOCADO, AVE.

COCOA, FL. 32926

(Use attachment if necessary)

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TALLAHASSEE, FLORIDA

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.)

PAUL R. FAIRMAN

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)