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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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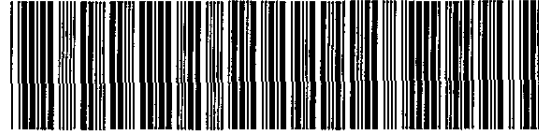
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TALLAHASSEE, FLORIDA

VALIDATION ONLY

Requestor's Name Alan Hecht  
Address 1441B  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone \_\_\_\_\_

CORPORATION(S) NAME

1843, LLC

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Profit                    | <input type="checkbox"/> Amendment       | <input type="checkbox"/> Merger                      |
| <input type="checkbox"/> NonProfit                 | <input type="checkbox"/> Foreign         | <input type="checkbox"/> Mark                        |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Dissolution     | <input checked="" type="checkbox"/> Other <u>LLC</u> |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> Annual Report   | <input type="checkbox"/> Change of Registered Agent  |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Reservation     | <input type="checkbox"/> Certificate Under Seal      |
| <input type="checkbox"/> Call When Ready           | <input type="checkbox"/> Photo Copies    | <input type="checkbox"/> After 4:30                  |
| <input checked="" type="checkbox"/> Walk In        | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> Mail Out                    |
| <input type="checkbox"/> Will Wait                 | <input type="checkbox"/> Pick Up         |  |

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 Empire Toll Free: 1-800-432-3028

**ARTICLES OF ORGANIZATION  
OF  
1843, LLC  
A Florida Limited Liability Company**

FILED  
04 MAY 13 PM 1:16  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

The undersigned, a natural person, does hereby form a Limited Liability Company under Florida Statutes §608, and other laws of the State of Florida.

**ARTICLE 1  
NAME**

The name of this limited liability company is **1843, LLC**, referred to in these Articles of Organization as the "**COMPANY**".

**ARTICLE 2  
REGISTERED OFFICE AND AGENT**

The mailing address and the street address of the principal office of the **COMPANY** is 21240 Harbor Way, Apt. 282, Aventura, Florida 33180 and the street address of the **COMPANY'S** initial registered office is 21240 Harbor Way, Apt. 282, Aventura, Florida 33180, and the initial Registered Agent at that address is **KATALIN MACH**.

**ARTICLE 3  
DURATION**

The existence of the **COMPANY** shall be perpetual.

**ARTICLE 4**  
**PURPOSE AND POWERS**

Subject to the laws of the State of Florida regarding Limited Liability Companies, the **COMPANY** may engage in any and all activities and business permitted under the laws of the United States and of the State of Florida. The **COMPANY** shall have all of the powers vested in a Limited Liability Company organized under and existing by virtue of the laws of the State of Florida.

**ARTICLE 5**  
**MANAGEMENT BY MANAGER(S)**

The **COMPANY** will be managed by a management committee, The **COMPANY** shall have three (3) Managers initially. The number of Managers may be increased or diminished from time to time pursuant to the **COMPANY'S** Operating Agreement, but shall not be less than one nor more than seven. The Manager(s) will be elected annually by the Members.

**ARTICLE 6**  
**IDENTIFICATION OF MANAGERS**

The name and street address of the initial Managers of the **COMPANY** who shall hold office for the first year of the **COMPANY'S** existence or until such person's successor is elected and has qualified is:

**Name**

**Address**

**GEORGE MACH**

21240 Harbor Way, Apt. 282  
Aventura, Florida 33180

**KATALIN MACH**

21240 Harbor Way, Apt. 282  
Aventura, Florida 33180

**DAVID MACH**

21240 Harbor Way, Apt. 282  
Aventura, Florida 33180

**ARTICLE 8**  
**RELATIONSHIP OF ARTICLES OF ORGANIZATION TO OPERATING AGREEMENT**

If a provision of these Articles of Organization differs from a provision of the **COMPANY'S** Operating Agreement, then, to the extent allowed by law, the Operating Agreement will govern.

**EXECUTED** at Aventura, Miami-Dade County, Florida, this 11 day of May, 2004.

Katalin Mach  
KATALIN MACH, an authorized person

**STATE OF FLORIDA**  
**COUNTY OF MIAMI-DADE**

The foregoing instrument was acknowledged before me this 11 day of May, 2004, by **KATALIN MACH**, who is ☒ personally known to me as the person described in and who executed the foregoing or ☐ who has produced \_\_\_\_\_ as identification, and who did ☐, did not ☐, take an oath.

**IN WITNESS WHEREOF**, I have hereunto set my hand and affixed my official seal at Miami, Florida, the day and year first written above.

Alan R. Hecht

(Printed Name of Notary)

Serial Number of Notary \_\_\_\_\_  
Notary Public, State of Florida  
My Commission Expires \_\_\_\_\_



**Alan R. Hecht**  
Commission #DD231846  
Expires: Jul 13, 2007  
Bonded Thru  
Atlantic Bonding Co., Inc.

## **CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED OFFICE**

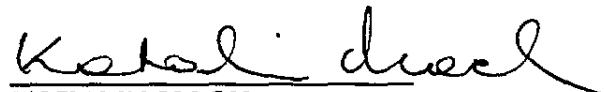
In accordance with § 48.091 and §608.415, Florida Statutes, the following designation and acceptance is submitted in compliance thereof.

### **DESIGNATION**

**1843, LLC**, desiring to organize as a Limited Liability Company under the laws of the State of Florida, hereby designates **KATALIN MACH** as it's Registered Agent and 21240 Harbor Way, Apt. 282, Aventura, Florida 33180 as its registered Office.

### **ACCEPTANCE**

Having been named as Registered Agent for the above named **COMPANY**, I hereby agree to act in such capacity for such **COMPANY** at its registered office.

  
**KATALIN MACH**  
**(REGISTERED AGENT)**