

L-04000050712

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : M. BURR KEIM COMPANY
Account Number : I19990000242
Phone : (215)563-8113
Fax Number : (215)977-9386

LIMITED LIABILITY COMPANY
CAPMAN, LLC

RECEIVED
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Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

CAPMAN, LLC

ARTICLE II - Address:

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

Principal Office Address:

4000 Hollywood Boulevard

Suite 375 South

Hollywood, FL 33021

Mailing Address:

4000 Hollywood Boulevard

Suite 375 South

Hollywood, FL 33021

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

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

Steve Ziegler

Name

4000 Hollywood Boulevard, Suite 375 South

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

Hollywood, FLORIDA 33021

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

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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

Bonnie Weiner

4000 Hollywood Boulevard, Suite 375 South
Hollywood, FL 33021

MGRM

Joseph Leone

4000 Hollywood Boulevard, Suite 375 South
Hollywood, FL 33021

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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.)

Steve Ziegler, Authorized Representative

Typed or printed name of signee

Flying 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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