

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

7 (850)205-0383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number

: (850)222-9428

LIMITED LIABILITY COMPANY

L&B, LLC

T	
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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Composite Filipa

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

L&B, LLC				
150.0, 00.0				
ARTICLE II - The mailing add		ne principal office of the Limite	d Liability Con	ipany i
Principal Office Address:		Mailing Address	Mailing Address:	
550 Ocean Cay		Same as principal offi	Same as principal office.	
Key Largo, Florida	33037			
		ered Office, & Registered Age	nt's Signature	:
The name and th	ne Florida street address of t	he registered agent are:		
	C T Co	poration System		
		ame		
		b Pine Island Road	<u>:"</u> ;	•
	1200 Sout	O FIDE DEBING RUMU		
		(P.O. Box NOT acceptable)	7 4 3 2 4	
	Florida street address	(P.O. Box <u>NOT</u> acceptable)	- 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	
	Florida street address Plantation		1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Florida street address Plantation City, St	(P.O. Box <u>NOT</u> acceptable) FLORIDA 33324 ate, and Zip		
	Florida street address Plantation City, Street and to accept	(P.O. Box <u>NOT</u> acceptable) FLORIDA 33324 ate, and Zip service of process for the above		
any at the place des to act in this capaci	Florida street address Plantation City, Street agent and to accept signated in this certificate, 1 in the comply of the comply in the complex in the compl	(P.O. Box NOT acceptable) FLORIDA 33324 Me, and Zip service of process for the above thereby accept the appointment as with the provisions of all statutes.	registered ages relating to the	nt and proper
eany at the place des to act in this capacit complete performan	Florida street address Plantation City, Street agent and to accept signated in this certificate, 1) ty. I further agree to comply on of my duties, and I am fan	(P.O. Box <u>NOT</u> acceptable) FLORIDA 33324 Me, and Zip service of process for the above thereby accept the appointment as with the provisions of all statute is not an accept the obligate.	registered ages relating to the ions of my posit	nt and proper
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eany at the place des to act in this capacit complete performan	Plantation City, States and to accept signated in this certificate, 1) The further agree to comply ce of my duties, and I am fan stered agent as provided for	(P.O. Box <u>NOT</u> acceptable) FLORIDA 33324 Me, and Zip service of process for the above thereby accept the appointment as with the provisions of all statute is not an accept the obligate.	registered ages relating to the ions of my posit	nt and proper
eany at the place des to act in this capacit complete performan	Plantation City, States and to accept signated in this certificate, 1) by. I further agree to comply ce of my duties, and I am fan stered agent as provided for CTC. By: Registered Ag	(P.O. Box NOT acceptable) FLORIDA 33324 ate, and Zip service of process for the above hereby accept the appointment as with the provisions of all statute, alliar with and accept the obligation Chapter 608, Florida Statutes. Exportation System	registered ages relating to the ions of my posit	nt and proper
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Page 1 of 2 (CONTINUED)

FLORE - NOVEMBER C T System Online

ARTICLE IV-Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Robert Coakley
	321 Newark Avenue, 4th Ploor
	Hoboken, NJ 07030
MGRM	Lisa Coakley
	321 Newark Avenue, 4th Floor
	Hoboken, NJ 07030
(Use attachment if necessary)	
NOTE: An additional article mus	t be added if an effective date is requested.
REQUIRED SIGNATURE:	an authorized representative of a member.
•	-
	608.408(3), Florida Statutes, the execution san affirmation under the penalties of perjury are true.)
N	Miriam Blemur

Filing Feer:
\$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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Typed or printed name of signee