

L04000056666

(Requestor's Name)

(Address)

(Address)

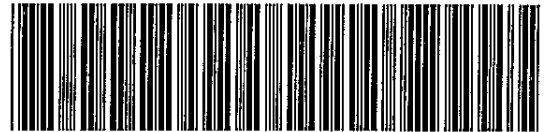
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



300038334953

07/28/04--01052--006 **125.00

Special Instructions to Filing Officer:

Name	
Availability	
Document	
Examiner	DCC
Updater	Office Use Only DCC
Updater via Mail	DCC
Preparer	DCC
Preparer	DCC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2004 JUL 28 P 3:41

FILED

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S. AND M. HOME IMPROVEMENTS, 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:

RICHARD L. RIESENBERG
(Name of Person)

RICHARD L. RIESENBERG, ACCOUNTANT
(Firm/Company)

644 E. HALLANDALE BEACH BOULEVARD
(Address)

HALLANDALE BEACH, FLORIDA 33009
(City/State and Zip Code)

For further information concerning this matter, please call:

RICHARD L. RIESENBERG at (954) 458-5514
(Name of Person) (Area Code & Daytime Telephone Number)

2004 JUL 28 P 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME:

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

S. AND M. HOME IMPROVEMENTS, LLC

ARTICLE II - ADDRESS:

THE MAILING ADDRESS AND STREET ADDRESS OF
THE PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:

3350 MYSTIC POINT DRIVE
SUITE ~~250~~ 2507
AVENTURA, FL 33180

ARTICLE III - REGISTERED AGENT, REGISTERED
OFFICE ADDRESS AND REGISTERED AGENT'S SIGNATURE:

SAM HERSHBERG
3530 MYSTIC POINT DRIVE #~~250~~ 2507
AVENTURA, FL 33180

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

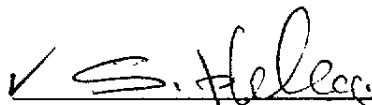
SECRETARY OF STATE
TALLAHASSEE, FL
2009 JUL 28 P 3
FILED

ARTICLE IV – MANAGER (S) OR MANAGING MEMBER (S):

THE NAME AND ADDRESS OF THE MANAGING MEMBER “MGRM”
IS AS FOLLOWS:

**SAM HERSHBERG
3530 MYSTIC POINT DRIVE
SUITE ~~2000~~ 2507
AVENTURA, FL 33180**

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.)

**SAM HERSHBERG
(PRINTED NAME OF SIGNEE)**

SECRETARY OF
TALLAHASSEE

2004 JUL 28 P 3:41

FILED