

L04000061225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

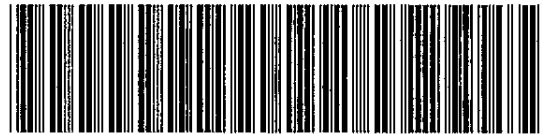
(Business Entity Name)

(Document Number)

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2004 AUG 18 AM 8:54
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
JUL 18 2004
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J. BRYAN AUG 19 2004

CORPDIRECT AGENTS, INC. (formerly CCRS)
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

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CORPORATIONS
TALLAHASSEE, FLORIDA

CONTACT: KATIE WONSCH
DATE: 8/18/04
REF. #: 01151.29224
CORP. NAME: LLF MANAGEMENT GROUP, LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 509184 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

ARTICLES OF ORGANIZATION

FOR

L L F MANAGEMENT GROUP, LLC

A Florida Limited Liability Company

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

ARTICLE I – Name

The name of the Limited Liability Company is:

L L F Management Group, LLC

ARTICLE II – Address

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

660 Glades Road
Suite 310
Boca Raton, Florida 33431

ARTICLE III - Duration

The period of duration for the Limited Liability Company is:

Perpetual

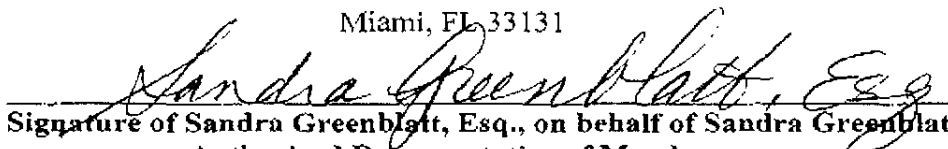
ARTICLE IV – Management

The Limited Liability Company is a manager-managed company.

ARTICLE V – Initial Registered Agent and Office

The name of the initial registered agent and the Florida street address of the initial registered office is:

Sandra Greenblatt, P.A.
2 South Biscayne Blvd.
Suite 3500
Miami, FL 33131


Signature of Sandra Greenblatt, Esq., on behalf of Sandra Greenblatt, P.A.,
Authorized Representative of Member

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED AGENT AND REGISTERED OFFICE IN
THE STATE OF FLORIDA.

1. The name of the limited liability company is:

L L F Management Group, LLC

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

Sandra Greenblatt, P.A.
2 South Biscayne Blvd.
Suite 3500
Miami, FL 33131

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JULIA H. HARRIS, CLERK
TALLAHASSEE, FLORIDA

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

By: _____

Sandra Greenblatt
Sandra Greenblatt, Esq., President