

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800)342-9856
Fax Number : (800)354-3381

LIMITED LIABILITY COMPANY

PLANET FIVE ASSOCIATES, LLC

Certificate of Status	0
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Page Count	02
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 18, 2004

GERALD WEINBERG

SUBJECT: PLANET FIVE ASSOCIATES, LLC
REF: W04000031453

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Alina
Document Specialist

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PLANET FIVE ASSOCIATES, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

7311 RAMOTH DRIVE

SAME

JACKSONVILLE FLORIDA

32226

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

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

JON D. HOROWITZ

W/ PAUL RONAN Name

7311 RAMOTH DRIVE

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

JACKSONVILLE FLORIDA 32226

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.

[Signature]
Registered Agent's Signature

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Division of State Services

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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:

PAUL ROBINSON - MGRM

7311 RAMOTH DRIVE
JACKSONVILLE, FLORIDA
32226

JOHN D. HORNSTEIN -
MGRM

954 WENTWORTH ROAD
TEANECK, NJ 07666

GREGORY L. LAWRENCE -
MGRM

1378 KERSEY LANE
POTOMAC, MD 20854

GARY ABRAHAM -
MGRM

131 REGATTA DRIVE
JUPITER FLORIDA 33477

(Use attachment if necessary)

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.)

JOHN D. HORNSTEIN
Typed or printed name of signer

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