# 104000084067

(Requestor's Name)
(Address)
, , , , , , , , , , , , , , , , , , , ,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Ousiness Entity Warne)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600042344356

15/15/04-111052 611 \*\*160.00

PILEL 2004 NOV 15 PM 1:57
2004 NOV 15 PM 1:57
2014 NOV 15 PM 1:57
2014 NOV 15 PM 1:57

J. BRWAN NOV 1 9 2004

# Brauer Law Offices, P.C.

A Professional Corporation Attorneys at Law

DAVID P. BRAUER
\*ALSO ADMITTED IN NEW YORK

266 Main St. Suite 28 Medfield, MA 02052 Tel.: (508) 359-5448 • Fax: (508) 359-8031

November 9, 2004



Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Monster Realty, LLC

Dear Sir or Madam:

Please find enclosed an original and one (1) copy of the Transmittal Letter and Articles of Organization for the above-referenced LLC. Would you kindly file the same.

I have enclosed the filing fee of \$160.00 and I hereby request a Certified Copy and Certificate of Status. I am also enclosing a self-addressed envelope for your convenience.

Thank you for your attention to this matter.

Sincerely,

David P. Brauer

DPB:mlf Enclosure

# TRANSMITTAL LETTER

Division	n of Corporations		
SUBJECT:	Monster Realty, LL	C	وسر
		d Liability Company)	2004
The enclosed Art	ticles of Organization and fee(s) are s	submitted for filing.	2004 NOV 15 TH
Please return all	correspondence concerning this matte	r to the following:	SEE SEE
	David P. Brauer	r, Esq.	PORP
_	0	Name of Person)	- URIDA
	Brauer Law Off:	ices, P.C.	
	(	Firm/Company)	·
	266 Main Stree	t, Suite 28	
	<u> </u>	(Address)	
	Medfield, MA	02052	
	(City	/State and Zip Code)	
For further inform	nation concerning this matter, please	call:	
David P	P. Brauer, Esq.	at (508) 359-54	48
<u> </u>	(Name of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a cl	neck for the following amount:		
<b>J \$</b> 125.00 Filing	g Fee S130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

TO:

Registration Section

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:

Monster Realty, LLC

### **ARTICLE II - Address:**

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

### Principal Office Address:

Moneter	Realty.	T.T.C

		93rd Avenue
Miami,	FL	33172-4801

### Mailing Address:

Monster Realty, LLC

2254	N.	W.	93rd	Avenue
Miam:	i,	FL	3317	72-4801

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

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

Je	SS	ica L	ynch				
_		•	Name				
22	54	N.W.	93rd	Ave	nue		
		Florida s	treet addr	ess (P.	O. Box	NOT acc	eptable)
Mi	am:	i		FL	331	72-48	01
		City	, State, an	d 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, F.S..

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

### 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	Jessica Lynch 2254 N.W. 93rd Avenue Miami, FL 33172-4801
MGRM	Peter D. Mote 5805 Cherrywood Terrace Greenbelt, MD 20770
(Use attachment if necessary)	₩₩.
NOTE: An additional article must b	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.)

Jessica Lynch
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)