

L04-0000 84631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

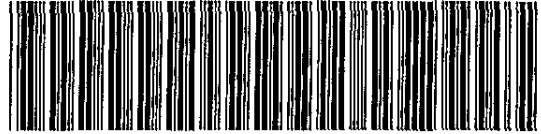
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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just



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11/16/04--01006--002 **125.00

NOT RECORDED

04 NOV 16 PM 2:48

PM 1:30

LAW OFFICE OF
DONALD B. MEDALIE, P.A.
CUMBERLAND BUILDING, SUITE 302
800 EAST BROWARD BOULEVARD
FORT LAUDERDALE, FL 33301

DONALD B. MEDALIE, ATTORNEY
E-MAIL: DMEDALIE@BELLSOUTH.NET

TELEPHONE (954) 522-5303
FAX (954) 522-1527

November 9, 2004

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Attention: Registration Section

Re: SaltAire Builders LLC

Dear Sir/Madam:

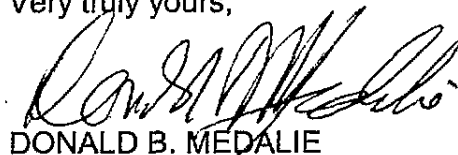
In connection with the above referenced limited liability company, included herein are the following items:

1. Original Transmittal Letter for SaltAire Builders LLC;
2. Original Articles of Organization for Florida Limited Liability Company; SaltAire Builders LLC, together with one (1) copy to be date stamped by your office;
3. Check number 3033, in the amount of \$125.00, representing the cost of the filing fee; and
4. Stamped, self-addressed envelope for returning the date stamped copy back to our office.

We trust that the chosen name SaltAire Builders LLC is still available. If not, kindly contact me at the telephone number on this letterhead, in order to avoid delay in our filing.

Thanking you in advance for your anticipated cooperation.

Very truly yours,


DONALD B. MEDALIE

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TALLAHASSEE, FLORIDA

DBM/cp

Enclosures: as stated

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SaltAire Builders 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:

Donald B. Medalie
(Name of Person)

(Firm/Company)

800 East Broward Boulevard, Suite 302
(Address)

Fort Lauderdale, FL 33301
(City/State and Zip Code)

For further information concerning this matter, please call:

Donald B. Medalie at (954) 522-5303
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|---|---|

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

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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:

MGR

Donald B. Medalie
800 East Broward Blvd., Ste. 302
Fort Lauderdale, FL 33301

(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.)

Donald B. Medalie

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)

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FILED

ALLAHSEE, FLORIDA