

LOS000011815

(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



600045413756

01/27/05--01061--013 \*\*130.00

2005 JAN 27 PM 1:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Law Offices  
**MICHAEL R. ROMM, P.A.**

ATTORNEY AND COUNSELOR AT LAW  
150 S.E. 12<sup>TH</sup> STREET (DAVIE BLVD.)  
SUITE 101  
FORT LAUDERDALE, FLORIDA 33316

TELEPHONE (954) 779-1015  
FACSIMILE (954) 779-1019  
Email: [mromm@rommlaw.com](mailto:mromm@rommlaw.com)

**TRANSMITTAL AND RETURN INSTRUCTIONS**

Phone #: 954-779-1015

January 26, 2005

Via FedEx

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**RE: Brenchardon Properties, LLC**

To Registration Section, Div. Of Corporations:

Enclosed please find the original and one copy of the Articles Of Organization Of Brenchardon Properties, LLC. Please file same in your usual prompt and efficient manner (stamped to evidence filing) and return in the SASE provided.

Thank you for your attention to this matter, and if you have any questions regarding the above and foregoing, please do not hesitate to contact our office.

Very truly yours,

MICHAEL R. ROMM, P.A.

BY: 

Michael Romm

2005 JAN 27 PM 1:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

Enclosed:

Filing Fee - \$100.00  
Des. Reg. Mat - \$25.00  
Cert. Statu - \$5.00  

---

\$130.00

## ARTICLES OF ORGANIZATION

Pursuant to the provisions of the Limited Liability Company Act of the state of FLORIDA, the undersigned, as organizer, adopts the following articles of organization.

### 1. NAME

The name of the limited liability company is BRENCHARDON PROPERTIES, LLC.

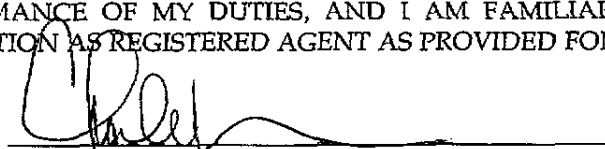
### 2. (A) DESIGNATED OFFICE

The address of the initial designated office of the limited liability company is 5815 S.W. 21<sup>st</sup> Street, Hollywood, FL 33023.

### (B) REGISTERED AGENT

Name: Charles Keller  
Principal office: 5815 S.W. 21<sup>st</sup> Street, Hollywood, FL 33023.  
Mailing Address: 5815 S.W. 21<sup>st</sup> Street, Hollywood, FL 33023.

HAVING BEEN NAMED AS REGISTERED AGENT 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 RELATIVE 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

### 3. ORGANIZER

The name and address of the organizer of the limited liability company is: Charles. W. Keller, 5815 S.W. 21<sup>st</sup> Street, Hollywood, FL 33023.

### 4. TERM

The limited liability company will not be a term company, and the existence of the limited liability company will be perpetual.

### 5. MANAGEMENT

The limited liability company will be managed by managing members ("MGRM" = Managing Member or Member Manager). The names and addresses of the initial managing member of the limited liability company is as follows:

<u>Name</u>	<u>Address</u>
Charles Keller	5815 S.W. 21 <sup>st</sup> Street, Hollywood, FL 33023.

FILED  
2005 JAN 27 PM 4:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**6. DEBTS AND LIABILITIES**

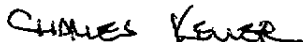
No member of the limited liability company will be liable for the debts and liabilities of the limited liability company.

**7. REQUIRED SIGNATURE OF MEMBER OR REPRESENTATIVE OF MEMBER**



\_\_\_\_\_  
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)



\_\_\_\_\_  
Typed or Printed Name of Signer

**Filing Fees**

\$100.00 Filing fee for Articles of Organization  
\$25.00 for Designation of Registered Agent  
\$30.00 for Certified Copy (Optional)  
\$5.00 for Certificate of Status (Optional)

2005 JAN 27 PM 1:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED