## L05000029407

(Re	questor's Name)	
(Adı	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	Mait Wait	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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DIVILIBAN OF COMPORATIONS

## TRANSMITTAL LETTER

TO: Registration Sec Division of Con			
SUBJECT: IN	vestprop S (Name of Limited	UN LLC Liability Company)	
The enclosed Articles of	Organization and fee(s) are su	bmitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
_R	uss Conne	ame of Person)	<del></del>
			28°
	(F	irm/Company)	PO E T
18	742 56 53	5th St.	MAR 23 PM 2: 36 LLAHASSEE, FLORIC
		(Address)	129 22
· 	Miramar, F	-C 33029	ORIONS ORIONS
		and England	
For further information of	concerning this matter, please	call:	
Russ Co	of Person)	at (954) 579 (Area Code & Daytime Te	- 8555
Enclosed is a check fo	r the following amount:		
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ET ADDRESS:	MAILING A Registration S	

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

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AKTICLE I - Name:
The name of the Limited Liability Company is:
Investprop Sun, 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:
18742 SW 55th St. 18742 SW 55th St. Miramar, FL 33029 Miramar, FL 33029
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:  Russ Connell  Name  18742 SW 55th 5t.  Florida street address (P.O. Box NOT acceptable)  Miramar - FL 33029  City, State, and Zip
Having been named as registered agent and to accept service of process for the above stated limited

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)

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Russ Connell 18742 SW SSH St. Miramar, FL 33029
-	
	R 23 Pt
(Use attachment if necessary)	PH 2: 36
NOTE: An additional article mu	st 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.)

RUSS Connell
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)