

L05000049359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

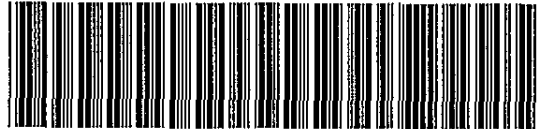
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2005 MAY 12 PM 2:09
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN MAY 18 2005

TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

Subject: **LEM Enterprises, 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:

Ricky J. Weiss, P.A.
5501 University Drive, #103
Coral Springs, FL 33067

For further information concerning this matter, please call:

Ricky J. Weiss, P.A.
954-757-1650

Enclosed is a check for the following amount:

\$155.00
Filing Fee & Certified Copy

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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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **LEM Enterprises, 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:

621 NE 34th Street
Pompano Beach FL 33064

621 NE 34th Street
Pompano Beach FL 33064

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

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

Ricky J. Wells, P.A.
Name

5501 University Drive #103
Florida Street Address

Coral Springs, FL 33067
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 property 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

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TALLAHASSEE, FLORIDA

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:

<u>MGRM</u>	<u>Louis Miranda</u>
	<u>621 NE 34th Street</u>
	<u>Pompano Beach FL 33064</u>

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Louis Miranda

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.)

Louis Miranda

Typed or printed name of signer

Filing Fees:

\$100.00 filing fee for Articles of Organization

\$25.00 Designation of Registered Agent

\$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA