

L05000067952

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

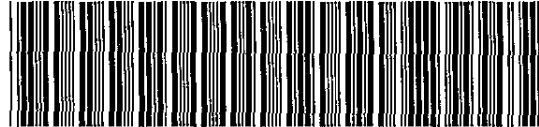
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/11/05--01013--011 **125.00

RECEIVED
05 JUL 11 AM 11:39
DIVISION OF CORPORATION

FILED
05 JUL 11 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

850-222-2785

City/St/Zip

Phone #

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- THE SALAZAR BUILDING, LLC

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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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:

**THE SALAZAR BUILDING, LLC,
A Florida Limited Liability Company**

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TALLAHASSEE, FLORIDA

ARTICLE II

Address:

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

Principal Office Address:
Marina Mile Business Park
2860 State Road 84
Building 1, Suite 103
Fort Lauderdale, FL 33312

Mailing Address:
Marina Mile Business Park
2860 State Road 84
Building 1, Suite 103
Fort Lauderdale, FL 33312

ARTICLE III

Registered Agent, Registered Office &
Registered Agent's Signature:

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

**MICHAEL G. SALAZAR
Marina Mile Business Park
2860 State Road 84
Building 1, Suite 103
Fort Lauderdale, FL 33312**

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

ARTICLE IV
Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

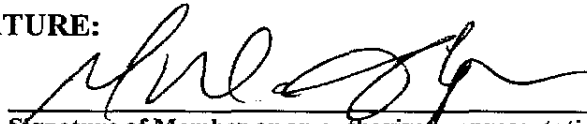
<u>TITLE:</u>	<u>Name and Address:</u>
Managing Member	Michael G. Salazar 2860 State Road 84 Building 1, Suite 103 Fort Lauderdale, FL 33312
Managing Member	Susan Salazar 2860 State Road 84 Building 1, Suite 103 Fort Lauderdale, FL 33312

ARTICLE V
Effective Date:

The effective date of this limited liability company shall be:

Simultaneous with the date of filing; and shall be perpetual in existence.

REQUIRED SIGNATURE:


Signature of 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.)
Michael Salazar
Typed or printed name of signee