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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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(Business Entity Name)

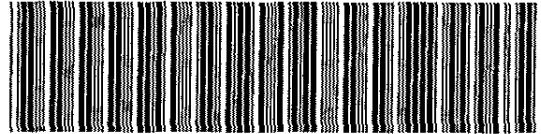
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2005 JUL 18 PM 2:30
DIVISION OF CORPORATIONS
TALLHASSEE, FLORIDA

J. BRYAN JUL 21 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JW BRED 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:

Bonnie Kaufman
(Name of Person)

(Firm/Company)

5670 Oaktree Ave.

(Address)

Hollywood, FL 33312

(City/State and Zip Code)

For further information concerning this matter, please call:

Email: Bon2414@aol.com

Bonnie Kaufman

(Name of Person)

at 305 343-2292

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$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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2008 JUL 18 PM 2:30
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Helen
Monahan
6/24/08

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JW BRED LLC

ARTICLE II - Address:

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

Principal Office Address:

5670 Oaktree Ave
Hollywood FL
33312

Mailing Address:

Same

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

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

Bonnie Kaufman
Name
5670 Oaktree Ave
Florida street address (P.O. Box **NOT** acceptable)
Hollywood FL 33312
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 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.

Bonnie Kaufman
Registered Agent's Signature

(CONTINUED)

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:

manager

Bonnie Kaufman
5670 Oaktree Ave
Hollywood, FL 33312

managing member

Joan Klemperer
3625 N. Country Club Dr
Aventura, FL 33180

MGRM

Rita Kessler
21230 NE 24th Ct
Miami, FL 33180

MGRM

Wendy Friedman
3625 N. Country Club Dr #1907
Aventura, FL 33180

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CLERK OF THE CIRCUIT COURT
MIAMI-DADE COUNTY, FLORIDA

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Bonnie Kaufman
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.)

Bonnie Kaufman
Typed or printed name of signer

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)