105000077121

00189-00524-00671, Form for LC

(Requestor's Name)
1937 E. AHANTIC Blud.
l l
00 510 (Address)
Pompanoben, FL 33060 (City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
811 = 10
84 FL CC

Office Use Only

N05-35457



700057583407

07/21/05--01031--015 **125.00

M. HODGES

July 14, 2005

Via Regular Mail

Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: Filing of Articles of Organization and Designation of Registered Agent:

Wilton Manors Business Center, LLC

To whom it may concern:

Enclosed please find a check issued in the amount of \$125.00, made payable to the Department of State, for filing of Articles of Organization and Designation of Registered Agent regarding the above referenced corporate entity, the originals of which are also included.

Please do not hesitate to contact the undersigned should you require any additional information.

Cordially,

Jim Beeson

Encl.

•



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 26, 2005

JIM BEESON 1937 E. ATLANTIC BLVD. SUITE 12 POMPANO BEACH, FL 33060

SUBJECT: WILTON MANORS BUSINESS CENTER, LLC

Ref. Number: W05000035457

We have received your document for WILTON MANORS BUSINESS CENTER, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached application to form a Limited Liability Company, only a cover letter and check were received.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 205A00048658

Michelle Hodges Document Specialist

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Wilton Manors Business Cent	ter, LLC f Limited Liability Company)	
The enclosed Articles of Organization and feet	(s) are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
Jim Beeson, Jr.		
	(Name of Person)	
	(Firm/Company)	
1937 E. Atlantic Blvd., Suite 9		
	(Address)	
Pompano Beach, FL 330	(City/State and Zip Code)	<u> </u>
	(City/Sime into Zip Code)	
For further information concerning this matter,	, please call:	
Jim Beeson, Jr.	at (954) 946-	4007
(Name of Person)	(Area Code & Day	time Telephone Number)
Enclosed is a check for the following amount	unt:	
I \$125.00 Filing Fee ☐ \$130.00 Filing Certificate of State		Certificate of Status &
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ussee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	ny is:		
Wilton Manors Business Center, LLC			
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Lia	bility Compa	ny is:
Principal Office Address:	Mailing Address:		
2100 North Andrews	2100 North Andrews		
Ft. Lauderdale, FL 33311	Ft. Lauderdale, FL		
ARTICLE III - Registered Agent, Registered address o		Signature:	
Jim Beeson, Jr.		0.5	
	Name		
1937 E. Atlantic Blvd., S	Suite 9	1	
Florida str	reet address (P.O. Box NOT acceptable)]
Pompano Beach, FL 33	060 _{FL}	= بيد م عرب عور	2
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..

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	VanBee LLC _
	1937 E. Atlantic Blvd., Suite 9
	Pompano Beach, FL 33060
MGRM	S.B. Business Systems, LLC
	18901 NE 29th Ave., Suite 100
	Aventura, FL 33180
(Use attachment if necessary)	
NOTE: An additional article m	ust be added if an effective date is requested.
REQUIRED SIGNATURE: Signature of a me	Moleso mber or an authorized representative of a member.
of this document co	h section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury ted herein are true.)
ナ フ/	M. BEESON, JR Typed or printed name of signee
	Typed or printed name of signee

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)