L0500010049a

(Requestor's Name)
(Address)
(Address)
(188,000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodinett National)
- ur 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100060424431

10/10/05--01013--012 **155.00



JOSHUA D. BASH

Attorney At Law 305 682-0400 / 940-1200 • Brwd: 954-922-1400 • Fax: 305-682-1800 20801 Biscayne Blvd. - Suite 304 Aventura, Florida 33180-1422

October 6, 2005

Secretary of State Division of Corporations P.O.B. 6327 Tallahassee, FL. 32314

Re: Florentin of Fort Lauderdale, L.L.C.

Dear Sir/Madam:

Enclosed please find my check in the sum of \$155.00 and an original and one copy of the Articles of Organization for the filing fee and a certified copy of the Articles of Organization for the above-named Corporation.

Please return a certified copy of the Articles to the undersigned.

Please call if you have any questions with regards hereto.

Thank you for your anticipated cooperation herein.

Very truly yours,

oshua d. bash, esq.

JDB/hs Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is:

FLORENTIN OF FORT LAUDERDALE, L.L.C.

ARTICLE II - ADDRESS

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

5944 Coral Ridge Drive PMB 144 Coral Springs, FL. 33076

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the Registered Agent is:

OMER CHUCK BADO

5944 Coral Ridge Drive PMB 144 Coral Springs, FL. 33076

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 an 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, Florida Statutes.

Registered Agent

DIVISION OF CORPORATIONS

05 OCT 10 AM 10: 48

ARTICLE IV - MEMBER

The name and address of the person signing these Articles of Organization is:

OMER CHUCK BADO

5944 Coral Ridge Drive PMB 144 Coral Springs, FL. 33076

IN WITNESS WHEREOF, the undersigned member has executed these Articles of Organization in Aventura, Miami-Dade County, Florida, on this, the ____ day of October, 2005.

OMER CHUCK BADO

MANAGING 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)