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SECRELANGE FLORIDA

250.00

COVER LETTER

TO:	Registration Se Division of Co				<u>.</u>
SUBJI	ECT: Sheri K				
		(Name of Limited	d Liability Compa	ıny)	
The en	closed Articles o	f Organization and fee(s) are s	ubmitted for filing	<u>5</u> .	
Please	return all corresp	ondence concerning this matte	r to the following	;	
	Sheri Kass				
		(1	Name of Person)		
	Sheri Kass	LLC			Pan.
		(Firm/Company)		
	7034 Gras	sy Bay Dr.			
			(Address)		
	West Pain	n Beach, Fl. 33411			
		(City	/State and Zip Code)	
For fur	ther information	concerning this matter, please	call:		
Sher	i Kass		at (561	615-8070)
	(Name	of Person)	(Area Cod	& Daytime Te	lephone Number)
Enclos	sed is a check fo	or the following amount:			
\$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy	y	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporation milding ecutive Center see, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Sheri Kass LLC	
Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7034 Grassy Bay Dr.	7034 Grassy Bay Dr.
West Palm Beach, Fl. 33411	West Palm Beach, Fl. 33411
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	egistered agent are:
Sheri Kass	TO REF.
Name	ILED 16 PM 12: 05 AKT OF STATE ASSEE, FLORID
7034 Grassy Bay Dr.	
Florida street addr	ess (P.O. Box NOT acceptable)
West Palm Beach	FL 33411
City, State, ar	nd Zip
Having been named as registered agent and to a liability company at the place designated in the	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as

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 (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Me

<u>Title:</u> "MGR" = Manager "MGRM" = Managing	Name and Address: Iember
MGR	Sheri Kass
	7034 Grassy Bay Dr.
	West Palm Beach, Fl. 33411
MGRM	Charles V. St. Lawrence
	7034 Grassy Bay Dr.
	West Palm Beach, Fl. 33411
(Use attachment if nece	sary)
(***	
CLE V: Effective date, it	other than the date of filing: (OPTIONAL)
effective date is listed, th	date must be specific and cannot be more than five business days price
0 days after the date of t	ing.)
DECKLOED CICKAT	TDE.
REQUIRED SIGNAT	RE:
	β
	I have kon
- Signa	re of a member or an authorized representative of a member.
J	re of a member or an authorized representative of a member. rdance with section 608.408(3), Florida Statutes, the execution

Sheri Kass

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)