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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	ECT: DMR Realty LL.C.	
30.041	(Name of Limited Liability Company)	
The en	nclosed Articles of Organization and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Deborah Greenspan (Name of Person)	
	DMR Realty L.L.C.	
	7975 W. Mc Nab Rd.	
	(Address)	
	Tamarac, FL 33321	
	(City/State and Zip Code)	
For fur	orther information concerning this matter, please call:	
\supseteq	eborah Green gam at 954 726-0902 (Area Code & Daytime Telephone Number)	JIVIŠK
	(Name of Person) (Area Code & Daytime Telephone Number)	N OF
Enclo	osed is a check for the following amount:	
\$12:	25.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)	Post Action
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Must end with the words "Limited Liability Company, Limited	L.L.C. Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7915 W. McNab Rd. Tamarac, FL 33331	same
Tamarac, FL 93321	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Deborah	Green par
7970 NW 4	ress (P.O. Box NOT acceptable)
.	EL 33324 P
TT: to the state of the	

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

EFFECTIVE DATE
124-06

<u>Title:</u> "MGR" = Manager	Name and Address:			
"MGRM" = Managing Member	. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
MORM	79 70 NW 4th Place			
	Plantation, FL 33324			
MGRM	Robin Bozard			
	Conse Springs, FC 33011			
MGRM	Michael Greenspan			
	Coral Sorings, FL 20071			
(Use attachment if necessary)				
ARTICLE V: Effective date, if other than the	date of filing: 1-29-06(OPTIONAL)			
(If an effective date is listed, the date must b to or 90 days after the date of filing.)	e specific and cannot be more than five business days prior			
to or >0 days after the date of things				
REQUIRED SIGNATURE:	1			
Carlos	1 Am			
Signature of a member	er 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 I	negein are true.)			
	med or printed name of signee			

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

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)