L06000062589

(Requ	uestor's Name)	
(Addı	ess)	
(Addı	ess)	
(City/	State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(D.v.si	ness Entity Name)	
(Busi	ness Entity Name)	
(Dog)	ument Number)	
(DOC)	intent Number)	
Certified Copies	Cortificates of	Statue
ocitiied oopies	ocitinoates of	
		. 1
Special Instructions to Fi	ling Officer:	15
		250
•		
	400	a r
	•	Δ
	Office Use Only	idei
	ŕ	w/

TION BY PHONE TO

DOC. EXAM



600061081166

06/12/06--01007--006 **125.00

SECRETARY OF STATE

APPROVED

COVER LETTER

TO:

TO:	Registration Se Division of Co			
SUBJE	_{CT:} 1405 F	ORT LAUDERDALE	LLC	
		(Name of Limite	d Liability Company)	
		f Organization and fee(s) are s	-	
Please r	return all corresp	ondence concerning this matte	er to the following:	
	David Litty			
•		(Name of Person)	
-	1405 FOR	Γ LAUDERDALE	LLC	
		(Firm/Company)	
;	Suite 101,	1915 N.E. 45th St.	•	
_			(Address)	
į	Fort Laude	erdale, Florida 333	808	
_		(City.	/State and Zip Code)	
For furt	her information	concerning this matter, please	call:	
David	Litty		at (954) 229-242	0
	(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclose	ed is a check fo	r 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)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1405 FORT LAUDERDALE	пс	
(Must end with the words "Limited Liabili	Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address:		
The mailing address and street a	dress of the principal office of the Limited Liability Compa	any is:
Principal Office Address:	Mailing Address:	
Suite 101, 1915 N.E. 45th St.	Suite 101, 1915 N.E. 45th St.	
Fort Lauderdale, Florida 33308	Fort Lauderdale, Florida 33308	
WILLIOTE III - McReichen WE	it, Registered Office, & Registered Agent's Signature.	
(The Limited Liability Company cannot se business entity with an active Florida region The name and the Florida street	ddress of the registered agent are:	
(The Limited Liability Company cannot se business entity with an active Florida regi	e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are:	
(The Limited Liability Company cannot se business entity with an active Florida region The name and the Florida street Christopher I	e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are:	
(The Limited Liability Company cannot se business entity with an active Florida region The name and the Florida street Christopher I	e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are: arah Name	
(The Limited Liability Company cannot se business entity with an active Florida region The name and the Florida street Christopher I	e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are: arah Name 15 N.E. 45th St. Florida street address (P.O. Box NOT acceptable)	
(The Limited Liability Company cannot se business entity with an active Florida region The name and the Florida street Christopher Suite 101, 1	e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are: arah Name 15 N.E. 45th St. Florida street address (P.O. Box NOT acceptable)	

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Ma $"MGRM" = N$	nager Managing Member	Name and Address:	•
MGR		David Litty	
		Suite 101, 1915 N.E. 45th St.	
		Fort Lauderdale, Florida 33308	
			
	•		

(Use attachme	ent if necessary)		
LEV: Effecti	ve date, if other than the	e date of filing:	(OPTIONAI
LE V: Effecti	ve date, if other than the listed, the date must b	e date of filing: e specific and cannot be more than five b	(OPTIONAI
LE V: Effecti	ve date, if other than the	e date of filing: se specific and cannot be more than five b	(OPTIONAI
LE V: Effecti ffective date is days after the	ve date, if other than the listed, the date must b	e date of filing: e specific and cannot be more than five b	(OPTIONAI ousiness days
LE V: Effecti ffective date is days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE:	e specific and cannot be more than five b	ousiness days
LE V: Effecti ffective date is days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE:	e date of filing: See specific and cannot be more than five by Additional control of a member of a membe	ousiness days
LE V: Effecti ffective date is days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member (In accordance with se	er or an authorized representative of a member ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury	ousiness days
LE V: Effecti ffective date is days after the	ve date, if other than the clisted, the date must be date of filing.) SIGNATURE: Signature of a member of this document const	er or an authorized representative of a member ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury	ousiness days

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)

