(060000072536

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

Office Use Only



000077043070

07/10/06--01033--015 **160.00

SECRETARY OF STATE

04 DE



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 11, 2006

WINGYEE ELIZA CHEN 1737 NW 94TH AVE CORAL SPRINGS, FL 33071

SUBJECT: CHAN & ASSOCIATES L.L.C.

Ref. Number: W06000030664

We have received your document for CHAN & ASSOCIATES L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 406A00044602

COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT: Char	n & Associates L.L.C.		
SUBJECT.		d Liability Company)	1,0
			2006 JI TALL
The enclosed Article	s of Organization and fee(s) are s	ubmitted for filing.	題に
Please return all com	espondence concerning this matte	er to the following:	SERVICE
Wingyee	Eliza Chan		E FL
	(Name of Person)	92
Chan & A	Associates L.L.C.		
		Firm/Company)	
1737 NV	V 94th Ave		
		(Address)	
Coral Si	orings, FL 33071		
		/State and Zip Code)	
For further informati	on concerning this matter, please	call:	
Wingyee Eliza	Chan	at (954) 214-2833	3
(N	ame of Person)	at (954) 214-2833 (Area Code & Daytime Te	lephone Number)
Enclosed is a check	k for the following amount:		
☐ \$125.00 Filing F	ee \$\int \$130.00\text{ 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limit	ed Liability Compan	ry is:	
Chan & Associates L.	L.C.		
(Must end with the words "Li	mited Liability Company,	"Limited Company" or their abbreviation "LLC," or "L.C.,")	٠.
ARTICLE II - Addre		he principal office of the Limited Liability Company	ier
Principal Office Add		Mailing Address:	10.
1737 NW 94th Ave		1737 NW 94th Ave	
Coral Springs, FL 33071		Cora I Springs, FL 33071	
		7:0 2	
W	rida street address of ingyee Eliza Chan	the registered agent are: SEE FLORID: Name 38 Name	
	Florida stre	eet address (P.O. Box NOT acceptable)	
Co	ral Springs	FL 33071	
	City, S	State, and Zip	
liability company a registered agent and a statutes relating to t	at the place designate agree to act in this caphe proper and completions of my position as	ad to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of the performance of my duties, and I am familiar with a registered agent as provided for in Chapter 608, F.S	s fall nd
	Registered Agent's !	Signature (REQUIRED)	

(CONTINUED) Page 1 of 2

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

W.

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

"MGR" = Manager "MGRM" = Managin	a Memher	Name and Address:	
	8 <i>Member</i>	∴	, Diet
Manager		Wingyee Eliza Chan	6 9
·		1737 NW 94th Ave	五二
		coral Springs FL 33071	影
			EST OF THE PROPERTY OF THE PRO
			-8m

		· ·	
			 ; -
(Use attachment if near CLE V: Effective date, of days after the date of	if other than the dat	te of filing: (OP pecific and cannot be more than five busine	TIONAL) ess days p
CLE V: Effective date, effective date is listed,	if other than the dat the date must be sp f filing.)		
CLE V: Effective date, effective date is listed, to days after the date of	if other than the dat the date must be sp f filing.)		
CLE V: Effective date, effective date is listed, to days after the date of REQUIRED SIGNA	if other than the date the date must be specifically.) TURE:		
CLE V: Effective date, effective date is listed, to days after the date of REQUIRED SIGNA Sign (In a of the	if other than the date the date must be specifiling.) TURE: ature of a member of accordance with section	r an authorized representative of a member. n 608.408(3), Florida Statutes, the execution are an affirmation under the penalties of perjury	
CLE V: Effective date, offective date is listed, to days after the date of REQUIRED SIGNA Sign (In a of th	if other than the date the date must be sp filing.) TURE: acture of a member of accordance with section is document constituted.	r an authorized representative of a member. n 608.408(3), Florida Statutes, the execution are an affirmation under the penalties of perjury	

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)