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(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:	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
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SECRETARY OF STATE

9-13-00



COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: ARCHI	TECTURAL BUILDE	R IIc			
	(Name of Limite	Liability Company)		_	
The enclosed Articles of	Organization and fee(s) are s	bmitted for filing.			
Please return all corresp	ondence concerning this matte	to the following:			
LARSTIN H	IAND				
	(fame of Person)			_
BUILD X IN	IC.				
	1	irm/Company)			
9069 SE BRI	DGE RD. E			2006	OIVIS
		(Address)		2006 SEP 18	
HOBE SO	UND, FL 33455			8	46. Ta
	(City	State and Zip Code)		PX	وز
For further information of	concerning this matter, please	all:		3: 23	7 To 10 To 1
Caitlin		_{at (} 772) 546-123	4		
(Name	of Person)	(Area Code & Daytime T	elephone Number)	-	
Enclosed is a check for	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 Certificate of Sta Certified Copy (additional copy is en	tus &	
	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

ARTICLE I - Name:

ARCHITECTURAL BUIL (Must end with the words "Limit		, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address		
The mailing address and	street address of	f the principal office of the Limited Liability Company is:
Principal Office Addre	ss:	Mailing Address:
9069 ^E : SE BRIDGE AC		9069 E SE BRIDGE AD.
HOBE SOUND, FL 33455		
ARTICLE III - Registe (The Limited Liability Company	cannot serve as its ov	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another
ARTICLE III - Registe (The Limited Liability Company business entity with an active F The name and the Florid	red Agent, Reg cannot serve as its ov forida registration.)	
ARTICLE III - Registe (The Limited Liability Company business entity with an active F The name and the Florid	red Agent, Reg cannot serve as its ov lorida registration.)	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registe (The Limited Liability Company business entity with an active F The name and the Florid	red Agent, Reg cannot serve as its ov forida registration.)	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another SEP 18 Of the registered agent are:
ARTICLE III - Registe (The Limited Liability Company business entity with an active F The name and the Florid PATI	red Agent, Reg cannot serve as its ov forida registration.)	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another SEP 18 Of the registered agent are:
ARTICLE III - Registe (The Limited Liability Company business entity with an active F The name and the Florid PATI	red Agent, Reg cannot serve as its over lorida registration.) a street address of RICK FOGERTY	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another SEP of the registered agent are: Name Name
ARTICLE III - Registe (The Limited Liability Company business entity with an active F The name and the Florid PATE 9065	red Agent, Reg cannot serve as its over lorida registration.) a street address of RICK FOGERTY	istered Office, & Registered Agent's Signature; on Registered Agent. You must designate an individual or another SEP 18 PM SECON TAIL FOR

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 Member is as follows:

"MGR" = Man	aner		
	anaging Member		
MGR		A.Daum	
		9069 É SE BRIDGE AD.	<u>, , , , , , , , , , , , , , , , , , , </u>
		Hobe Sound, FL 33455	
			
			
			_ .
			
***************************************	\		
(Use attachmen	• .		····
ICLE V: Effectiv	e date, if other than the disted, the date must be sidate of filing.)	ate of filing: \$EPT. 15 2006 . (OPT specific and cannot be more than five business	
ICLE V: Effective date is 1900 days after the	te date, if other than the delisted, the date must be state of filing.)	ate of filing: (OPT	ss days prior
ICLE V: Effective date is 1900 days after the	e date, if other than the disted, the date must be sidate of filing.) SIGNATURE: Signature of a member of the side of the si	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury	SECRITARY OIVISION OF SECRITARY OF SECRITARY
ICLE V: Effective date is 1900 days after the	e date, if other than the disted, the date must be sidate of filing.) Signature of a member of this document constitution that the facts stated her	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury	ss days prior

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)