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(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

00 0CT 27 P 5:

## **COVER LETTER**

Division of Cor					
SUBJECT: HOLT	ON CAPITAL, LLC	;			
	(Name of Limited	Liability Company)			
The enclosed Articles of	f Organization and fee(s) are su	ubmitted for filing.			
Please return all correspondent	ondence concerning this matte	r to the following:			
Kenneth I	M. Salzman		_	_	
		Name of Person)			
<del></del>		Firm/Company)			
312 Clen	_	uite 306			
012 01011		(Address)	E SE	700b	
West Pa	lm Beach, Florid	da 33401	CRET	130 M	
		/State and Zip Code)	SSE YRY	27	
For further information	concerning this matter, please	call:	OF STA E. FLOF	ن ل	
Kenneth M. Sa	alzman	at (561 ) 315-15	99.BH	02	_ <del></del>
(Name	of Person)	(Area Code & Daytime T	elephone Nur	nber)	
Enclosed is a check for	or the following amount:				
<b>□ \$</b> 125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160. Certifica Certifica (additiona	ite of St d Copy	atus &
	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 r Circle		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

HOLTON CAPITAL, LLC (Must end with the words "Limited Liability Company, "Lim	nited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
312 Clematis Street	312 Clematis Street
Suite 306	Suite 306
West Palm Beach, Florida 33401	West Palm Beach, Florida 33401
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)  The name and the Florida street address of the Kenneth M. Salzman	e registered agent are:
Nam  11780 St Andrews Pla  Florida street a	. 25 CD
Wellington	FL 33414
City, State	

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

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Kenneth M. Salzman
	11780 St Andrews Place #207
	Wellington, Flroida 33414
	<del></del>
	<del></del>
	TRE CC
	(A)
	77 0
<del>_</del>	
	02 02
	the date of filing: October 23, 2006 (OPTIONA st be specific and cannot be more than five business day
REQUIRED SIGNATURE:	

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)

Typed or printed name of signee