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SECRETARY OF STATE AS DIVISION OF CORPORATIONS

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# TRANSMITTAL LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: PARKLAND II, LLC
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mark Spirtis
(Name of Person)
Parkland II, LLC
(Firm/Company)
800 Harbour Isles Place
(Address)
North Palm Beach, Florida 33410
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Spirtis at (561) 691-8222 (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 **MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 SECRETARY OF STATIONS
DIVISION OF CORPORATIONS
OF DEC 13 PM 1:40

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Parkland II, L.L.C.

ARTICLE II - Address:

800 Harbour Isles Place, North Palm Beach, Florida 33410

**Principal Office Address:** 

Same

Mailing Address:

Same

## ARTICLE II - Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Legal Information Services

Name

2500 Weston Road, Suite 404

Florida Street Address (P.O. Box NOT Acceptable)

Weston, Florida 33331

City, State and Zip Code

Having been named as registered agent and to accept service of process for the above stated limited liability company out the place designated in this cartificate, 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 roper and complete performance of any 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

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

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

Title:

Manger

Managing Member

Name and Address:

Mark Spirtis -800 Harbour Isles Place, NPB-FL 33410 Kathryn Spirtis - 800 Harbour Isles Place, NPB-FL 33410

REQUIRED SIGNATURE:

(Signature of Member or Authorized Representative of a Member)

(In accordance with Section 608.408(3), Florida Statutes, the ex4ecution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Mark Spirtis

(Typed or printed name of signee)

### Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)