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DEPARTMENT OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

3/19/07



CORPORATION SERVICE COMPANY

*file just*  
EFFECTIVE DATE 3/14/07

ACCOUNT NO. : 072100000032

REFERENCE : 810842 11504A

AUTHORIZATION :

*[Signature]*

COST LIMIT : \$ 125.00

FILED  
07 MAR 20 PM 3:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : March 20, 2007

ORDER TIME : 11:24 AM

ORDER NO. : 810842-005

CUSTOMER NO: 11504A

DOMESTIC FILING

NAME: BIRKENWALD LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS: \_\_\_\_\_

EFFECTIVE DATE \_\_\_\_\_

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BIRKENWALD LLC

(Must end with the words "Limited Liability Company," "Limited 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:**

17101 NE 19th Avenue

Suite 201

North Miami Beach, FL 33162

**Mailing Address:**

17101 NE 19th Avenue

Suite 201

North Miami Beach, FL 33162

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Richard Birkenwald

Name

17101 NE 19th Avenue, Suite 201

Florida street address (P.O. Box NOT acceptable)

North Miami Beach FL 33162

City, State, and Zip

*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..*

*R. Birkenwald*

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Gabriel Birkenwald

3909 Adams Street

Hollywood, Florida 33021

MGR

Richard Birkenwald

3917 Washington Street

Hollywood, Florida 33021

MGR

Michel Birkenwald

Flat 5, 1 A Queen's Gaate

London, UK SW7 5EH

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 03/19/07 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

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

Gabriel Birkenwald

Typed or printed name of signee

**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)**