Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000127808 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : HUBCO

Account Number : 104662003400

Phone

: (516)935-3940

Fax Number

: (516)935-3088

ORIDA/FOREIGN LIMITED LIABILITY CO.

F.D.S. Holdings, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

RLH

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

$\mathbf{A}1$	RTI	CL	E	Τ -	Name	2
---------------	-----	----	---	-----	------	---

The name of the Limited Liability Company is: F.D.S. Holdings, LLC

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:	
2579 NW 19th Street	2579 NW 19th Street	
Fort Lauderdale, FL 33311	Fort Lauderdale, FL 33311	<u> </u>
		,
	and the sweet of the control	0. Vid
ARTICLE III - Registered Agent, Registered The name and Florida street address of the registered age Jeffrey Mit	nt are:	AWA - B
	Name	AH IO:
2579 NW 1	19th Street	
(P.O. E	3ex or Mail Drop Box NOT Acceptable)	10 88
Fort Laude	erdale, FL 33311	
-	(City / State / Zip)	
Having been named as registered agent and to accept at the place designated in this certificate, I hereby accapacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the occhapter 608, F.S. Registered Agent	cept the appointment as registered agent and ag is of all statutes relating to the proper and comp	gree 10 act in this plete performance

H07000127808

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing	y Member
MGR	Jeffrey Minnick- 2579 NW 19th Street, Fort Lauderdale, FL 33311
(Use attachment if nec	essary)
REQUIRED SIGNA	ATURE:
	Signature of a member of 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.)
•	Inffrost Minnick

Typed or printed name of signee