

LO 7000051475-

(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:

Office Use Only



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05/14/07--01047--004 **310.00

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DIVISION OF CORPORATIONS
07 MAY 14 PM 1:56



Goldman
Gruder &
Woods, LLC

Law Offices

PLEASE REPLY TO:

200 Connecticut Avenue
Norwalk, CT 06854
Telephone: (203) 899-8900
Facsimile: (203) 899-8915
Website: Goldgru.com
Email: smarshall@goldmangruderwoods.com

Greenwich Office:

125 Mason Street
Greenwich, CT 06830

VIA FED EX

May 11, 2007

Florida Department of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Filing of Articles of Organization

Dear Sir or Madam:

Enclosed you will find two Articles of Organization documents for the following LLCs:

1. Limited Family & Friends L.L.C.
2. F & F Investment Group L.L.C.

I have also enclosed a check in the amount of \$310.00 for the filing and a certified copy of the Articles of organization (\$155.00 for 2). Please let me know if you have any questions or problems. Thank you.

Very Truly Yours,


Sarah L. Marshall, Esq.

[enclosures/check]

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DIVISION OF CORPORATIONS
07 MAY 14 PM 1:55

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Limited Family & Friends L.L.C.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sarah Marshall

(Name of Person)

Goldman Gruder & Woods, LLC

(Firm/Company)

200 Connecticut Avenue, Suite 2F

(Address)

Norwalk, CT 06854

(City/State and Zip Code)

For further information concerning this matter, please call:

Sarah Marshall

(Name of Person)

at

203

(Area Code & Daytime Telephone Number)

899-8900

Enclosed is a check for 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 Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Limited Family & Friends L.L.C.

(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:

3498 Melissa Ct

Port Charlotte, FL 33980

Mailing Address:

3498 Melissa CT

Port Charlotte, FL 33980

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:

Francisque Paulemon

Name

3498 Melissa Ct

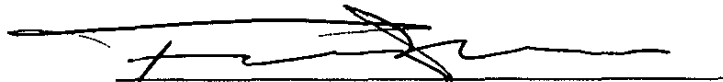
Florida street address (P.O. Box **NOT** acceptable)

Port Charlotte, FL 33980

City, State, and Zip

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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

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

Francisque Paulemon

3498 Melissa CT

Port Charlotte, FL 33980

MGR

Jean R. St Cloud

13 Adamson Ave

Norwalk, CT 06854

MGR

Blaise Pierre

250 W. Cedar St.

Norwalk, CT 06854

MGR

Fritz Jacques

1022 Rodwanshyre CR

MC Donough, GA 30253

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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.)

Francisque Paulemon

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)

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