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COVER LETTER

TO: Registration Section Division of Corporations					
Division of Corporations					
SUBJECT: Little Rock Historic Rentals, LLC					
(Name of Limite	(Name of Limited Liability Company)				
The surface of A still as CO and a still as CO	1 % 10 m				
The enclosed Articles of Organization and fee(s) are s	ubmitted for filing.				
Please return all correspondence concerning this matter	er to the following:				
٦٠	LL E. JUDY				
Name of Person)					
(Firm/Company)					
Ft. Lauderdale, FL 33304 (City/State and Zip Code)					
_	(Addiss)				
Ft. Lauderdale, FL 33304					
(City	/State and Zip Code)				
For further information concerning this matter, please call:					
July e. Jory	954 \ 294. 2428				
(Name of Person)	at (954) Z94· 2428 (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:					
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee &	✓ \$155.00 Filing Fee &				
Certificate of Status	Certified Copy Certificate of Status &				
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)				
Mailing Address Registration Section	Street/Courier Address Position Section				
Registration Section Division of Corporations	Registration Section Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle				
i dilaliassee, i L 52514	Tallahassee, FL 32301				

May 25, 2007

Deau Sirs:

Please accept the enclosed check and Orticles of Organization for the newly created Little Rock Hostoric Rentals, LLC.

If you have any questions, please do not hesitate to contact me @ 954.294.2428.

Sincerely,

Jill Judy

1019 NE 10th Avenue

Ft. Lauderdale, FL 33304

954.294.2428.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:			
Little Rock Historic Rentals, LLC (Must end with the words "Limited Liability Company, "Limited)	ed Company" or their abbreviation "LLC," or "L.C.,")		
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Com	pany	is:
Principal Office Address:	Mailing Address:		
1019 NE 10th Avenue Fort Lauderdale, FL 33304	1019 NE 10th Avenue Fort Lauderdale, FL 33304		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)		;	
The name and the Florida street address of the r	egistered agent are:	07 MAY	SEC
Jill E. Judy Name	<u></u>	1AY 30	SETAN
	iress (P.O. Box <u>NOT</u> acceptable)	PM I:	CORPORT CORPORT
Fort Lauderdale, City, State, a	FL 33304 and Zip	24	ATE

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 (REOURED)

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Mark H. Brown 1019 NE 10th Avenue Fort Lauderdale, FL 33304
MGRM	Jill E. Judy 1019 NE 10th Avenue Fort Lauderdale, FL 33304
(Use attachment if necessary)	
	ate of filing: June 1, 2007 . (OPTIONAL) specific and cannot be more than five business days prior
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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)