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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 29, 2007

ALLAN M. GLASER, P.A. 11900 BISCAYNE BLVD. MIAMI, FL 33181

SUBJECT: 4201 SW 4TH AVENUE, LLC Ref. Number: W07000025566

We have received your document for 4201 SW 4TH AVENUE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 307A00036837

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Allan M. Glaser, P.A.

Biscayne Centre Suite 807 11900 Biscayne Boulevard Miami, Florida 33181

> TELEPHONE TELEFAX

(305) 893-5999 (305) 893-8251

May 24, 2007

Florida Department of State Division of Corporation Attn: Registration Section PO Box 6327 Tallahassee, Florida 32314

> Re: 4201 SW 64th Avenue, LLC Our File No. 4460-0

Dear Sir or Madam:

Enclosed please find the original and a copy of the Articles of Organization=for 4201 SW 64th Avenue, LLC together with a check payable to Department of State in the amount of \$130.00 which includes your registration fee of \$125.00 and \$5.00 for a Certificate of Status. Please stamp the copy with the date of filing and return it with the Certificate of Status.

Should you have any questions or problems regarding this request, please do not hesitate to contact our office.

Cordially yours,

All al other

ALLAN M. GLASER

AMG/to Enc. 173204460-0/052407

ALLAN M. GLASER ATTORNEY AT LAW

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

4201 S.W. 64TH AVENUE, LLC

ARTICLE II - Address: The mailing address and street of the principal office of the Limited Liability Company is:

11900 Biscayne Blvd-Suite 801 Miami, FL 33181

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

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



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

ARTICLE IV - Management (Check box if applicable.)

X The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company

(An additional article must be added if an effective date is requested)

Member Ami Haddad represented by:

Signature of 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.)

Allan. M Glaser

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)