

L07000088549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

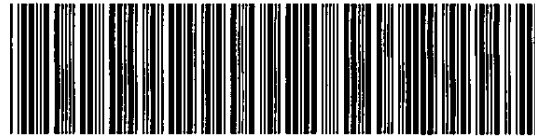
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600108520306

08/28/07--01013--001 **125.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 28 PM 3:26

JB

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Norris Satnick Ft. Pierce Assoc. II, LLC
(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:

Mark Bava
(Name of Person)
Norris Satnick Ft. Pierce Assoc. II, LLC
(Firm/Company)
350 Veterans Blvd
(Address)
Rutherford NJ 07070
(City/State and Zip Code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 28 PM 3:26

For further information concerning this matter, please call:

Jeana Lee at (201) 804-8700 x242
(Name of Person) (Area Code & Daytime Telephone Number)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Norris Satnick Ft. Pierce Assoc II, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mark Bava
Joseph Morris
Robert Morris

Mailing Address:

350 Veterans Blvd Rutherford NJ
350 Veterans Blvd Rutherford NJ
350 Veterans Blvd Rutherford NJ

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:

Mark Bava
Name

1901 S US Hwy 1

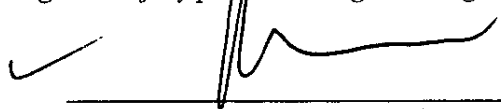
Florida street address (P.O. Box **NOT** acceptable)

Ft. Pierce FL 34950

City, State, and Zip

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 28 PM 3:26

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

MGRM

Name and Address:

Mark Bava
350 Veterans Blvd
Putnam NJ 07070

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 28 PM 3:26

(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:

MARK M. BAVA
EXECUTIVE VICE PRESIDENT



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.)

Mark Bava

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)