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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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J. BRYAN

MAR 1 4 2008

**EXAMINER** 

### **COVER LETTER**

TO:	Registration ! Division of Co						
CUDI	rem FORT	Y VENTURES LL	C.				
SUBJECT: FURIT VENTURES LLC.  (Name of Limited Liability Company)						_	
m	1 1 2 2 1		t to to me		•		
		of Organization and fee(s) are		_			
Please	return all corres	pondence concerning this mat	ter to the following	g:			
	Jamie A F	ortier				· 	_
			(Name of Person)				
							_
			(Firm/Company)				
	8690 NW	17th Court					
			(Address)				-
	Pembroke	e Pines, FL 33024	ļ			08	OVYIS
(City/State and Zip Code)						MAR	22 22 22 22
For fu	ther information	concerning this matter, pleas	e call:			08:MAR 13: PM	TARY OF
Jamie A Fortier		at ( 954	, 993-683	O		ORAI	
	(Name	e of Person)	(Area Coo	de & Daytime Tele	phone Number)		SKOL
Enclo	sed is a check for	or the following amount:					
□\$125	.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	S155.00 Filin Certified Co (additional cop	рру	\$160.00 Filing Certificate of S Certified Copy (additional copy is	tatus &	<b>l</b> )
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton I 2661 Ex	ourier Address ion Section of Corporations Building ecutive Center C see, FL 32301			



#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

#### FORTY VENTURES 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: 8690 NW 17th Court Pembroke Pines, FL 33024 Pembroke Pines, FL 33024 Pembroke Pines, FL 33024

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:

Jamie A Fortier

Name

8690 NW 17th Court

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

Pembroke Pines, FI 33024

City, State, and Zip

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 (REQVIRED)

(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:

	_	Jamie A Fortier	
		8690 NW 17th Court	
		Pembroke Pines, FL 33024	
	•		
•			
			<u> </u>
	-		
(Use attachment if			08 MAR 13
CLE V: Effective dat	te, if other than the	e date of filing: (Cope specific and cannot be more than five bus	PTIONAL
ffective date is listed days after the date		pe specific and cannot be more than five bus	iness days
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, days after the date			
days after the date			

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

Jamie A Fortier

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

Filing Fees:

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee