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DEPARTMENT OF STATE VISION OF COMPORATIONS

B. KOHR

APR 2 2 2008

EXAMINER



ACCOUNT NO. : 072100000032

REFERENCE: 537093 4305390

AUTHORIZATION :

COST LIMIT : \$

ORDER DATE: April 21, 2008

ORDER TIME : 2:08 PM

ORDER NO. : 537093-005

CUSTOMER NO: 4305390

DOMESTIC FILING

NAME: M. STAMLER HOLDINGS, LLC

XX ___ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _ PLAIN STAMPED COPY

CONTACT PERSON: Amanda Roath - EXT. 2955

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CON

ARTICLE I - Name:

The name of the Limited Liability Company is:

M. STAMLER HOLDINGS, 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:	Mailing Address:	
2030 S. OCEAN DRIVE	1331 HUDSON ROAD	
HALLANDALE BEACH, FL 33009	TFANECK, NJ 07666	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as us 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:

ERNA FROLOW	
Nair	ne
2030 S. OCEAN DRI	VE
Florida street a	iddress (P.O. Box <u>NOT</u> acceptable)
HALLANDALE	FL 33009
City, State	e, 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 (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	Name and Address:
"MGRM" = Managing Mem	MARSHA STAMLER 1331 HUDSON ROAD
	TEANECK, NJ 07666
(Use attachment if necessary	r)
TICLE V: Effective date, if other an effective date is listed, the date or 90 days after the date of filing.	r than the date of filing:
required signature	us Sul
(In secordar of this docu	of a member or an authorized representative of a member. The with section 608.408(3). Florida Statutes, the execution ment constitutes an affirmation under the penalties of perjury acts stated herein are true.)
	HA STAMLER 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)