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DRIMAY - R AMIL: 25

J. BRYAN

MAY - 9 2008

**EXAMINER** 

#### **COVER LETTER**

TO: Registration S Division of C	orpdrations '					
SUBJECT: 1001	H & BONE, LLC (Name of Limite	ed Liability Comp	pany)		-	
The enclosed Articles	of Organization and fee(s) are s	whmitted for fili	ng.			
	pondence concerning this matte					
Benjamin	P. Shenkman, Esq	<b> .</b>				
	(	Name of Person)				-
Benjamin	P. Shenkman, P.A	۸.				
-	· ·	(Firm/Company)				-
2160 W. A	Atlantic Ave., 2nd F	loor				
		(Address)		· · ·	80	
Delray Be	each, FL 33445				08 MAY	SIONE
	(City	/State and Zip Coo	le)		ධ	FCO
For further information	concerning this matter, please	call:			MIII: 25	CORPORATIONS
Benjamin P. S	henkman	at ( 561	274-648	8	25	I ONS
(Name	e of Person)	(Area Co	de & Daytime Tele	ephone Number)	-	
Enclosed is a check f	or the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified Co (additional co		\$160.00 Filing I Certificate of Sta Certified Copy (additional copy is	atus &	
· .s	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton 2661 Ex	Courier Address tion Section n of Corporations Building secutive Center Cosee, FL 32301			

### FOR TOOTH & BONE, LLC

# DIVISION OF CORPORATIONS 08 MAY -8 AM 11: 25

#### ARTICLE I - Name

The name of the Limited Liability Company is: TOOTH & BONE, LLC.

#### ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is: 2238 West Atlantic Avenue, Delray Beach, FL 33445.

ARTICLE III – Registered Agent, Registered Office, and Registered Agent's Signature

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

Michael Tramontana 2238 West Atlantic Avenue Delray Beach, FL 33445

Having been named as registered agent 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, Florida Statutes.

Registered Agent's Signature

#### ARTICLE IV - Managing Members

The Limited Liability Company is to be managed by its members. The name and address of each Managing Member is as follows:

Michael Tramontana

2238 West Atlantic Avenue

Delray Beach, FL 33445

Michael Scharmett

6256 N.W. 24th Street

Boca Raton, FL 33434

IN WITNESS WHEREOF, I have signed these Articles of Organization as a member and acknowledged them to be my act this \_\_\_\_\_ day of \_\_\_\_\_\_\_, 2008.

(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)

Signature of a Member:

Michael Tramoptana

SECRETARY OF STATE
GIVISION OF CORPORATIONS

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF Florida.

1. The name of the Limited Liability Company is:

**TOOTH & BONE, LLC** 

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

Michael Tramontana 2238 West Atlantic Avenue Delray Beach, FL 33445

Having been named as registered agent 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, Florida Statutes.

Registered Agent's Signature