

**L08000082708**

## Florida Department of State

Division of Corporations  
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## Electronic Filing Cover Sheet

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## To:

Division of Corporations  
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## From:

Account Name : FASTKIT CORPORATE OUTFITS  
Account Number : 071001002335  
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TALLAHASSEE FLORIDA

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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## FORSTMANN ROCK, LLC.

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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August 29, 2008

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FASTKIT

SUBJECT: FORSTMANN ROCK, LLC  
REF: W08000040279

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Article IV list the name of the Managing Member.

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) 245-6067.

Neysa Culligan  
Document Specialist

FAX Aud. #: E08000204014  
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TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**FORSTMANN ROCK, 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:**

10800 BISCAYNE BLVD

10TH FLOOR

MIAMI, FL 33181

**Mailing Address:**

10800 BISCAYNE BLVD

10TH FLOOR

MIAMI, FL 33181

**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:

**LUKE FORSTMANN**

Name

**10800 BISCAYNE BLVD 10TH FLOOR**

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

**MIAMI, FL 33161**

FL

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 (REQUIRED)

(CONTINUED)

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**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:**

LUKE FORSTMANN

10800 BISCAYNE BOULEVARD

10TH FLOOR

MIAMI, FL 33181

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: SEPTEMBER 1ST (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:**

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.)

LUKE FORSTMANN

Typed or printed name of signer

**Filing Fee:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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