

L08000089935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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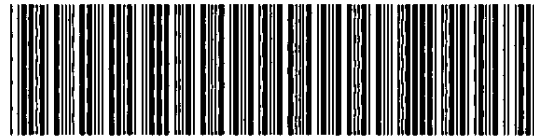
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
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B. KOHR

SEP 23 2008

EXAMINER

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08 SEP 22 AM 9:35  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA



UCC FILING & SEARCH SERVICES, INC.  
1574 Village Square Blvd Ste 100  
Tallahassee, Florida 32309  
(850) 681-6528

**HOLD**  
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CORPORATION NAME (S) AND DOCUMENT NUMBER(S):

1750 North Dysart Road, LLC

September 22, 2008

**Filing Evidence**

☒ Plain/Confirmation Copy

☐ Certified Copy

**Retrieval Request**

☐ Photocopy

☐ Certified Copy

**Type of Document**

☐ Certificate of Status

☐ Certificate of Good Standing

☐ Articles Only

☐ All Charter Documents to Include  
Articles & Amendments

☐ Fictitious Name Certificate

☐ Other

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input type="checkbox"/>            | Profit            |
| <input type="checkbox"/>            | Non Profit        |
| <input checked="" type="checkbox"/> | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                    |
|--------------------------|------------------------------------|
| <input type="checkbox"/> | Amendment                          |
| <input type="checkbox"/> | Resignation of RA Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent         |
| <input type="checkbox"/> | Dissolution/Withdrawal             |
| <input type="checkbox"/> | Merger                             |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Reports   |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |
| <input type="checkbox"/> | Reinstatement    |

| REGISTRATION/QUALIFICATION |                   |
|----------------------------|-------------------|
| <input type="checkbox"/>   | Foreign           |
| <input type="checkbox"/>   | Limited Liability |
| <input type="checkbox"/>   | Reinstatement     |
| <input type="checkbox"/>   | Trademark         |
| <input type="checkbox"/>   | Other             |

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

**ARTICLE I: NAME**

The name of the Limited Liability Company is:

1750 NORTH DYSART ROAD, LLC

**ARTICLE II: ADDRESS**

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

5130 North Federal Highway, Suite 8  
Fort Lauderdale, Florida 33308

**ARTICLE III: PURPOSE**


The purpose for which this Limited Liability Company is organized is:

Any and all lawful business.

**ARTICLE IV: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE:**

Grant W. Kehres  
2000 Glades Road, Suite 302  
Boca Raton, Florida 33431

*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 property 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

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**ARTICLE V - MANAGEMENT:**

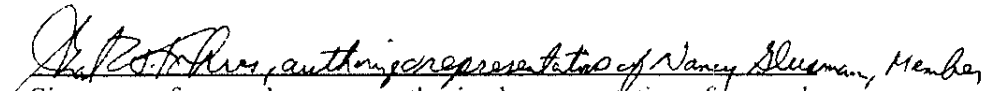
The Limited Liability Company is to be managed by a managing member and is, therefore, a manager - managed company. The name and address of the managing member is:

Title: Managing Member  
Nancy Glusman  
5130 North Federal Highway, Suite 8  
Fort Lauderdale, Florida 33308

**ARTICLE VI - EFFECTIVE DATE:**

The effective date for this Limited Liability Company shall be:

The date these Articles are filed at the office of the Florida Secretary of State.

  
Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

GRANT W. KEHRES, authorized representative of NANCY GLUSMAN, Member  
Typed or printed name of signee.