

LD8000109157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

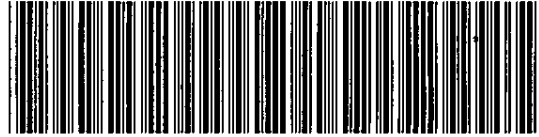
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 NOV 24 PM 2:59

G. MCLEOD

NOV 25 2008

EXAMINER

**KENNEDY & ASSOCIATES
3037 LAKE SHORE DRIVE
DEERFIELD BEACH, FL 33442**

Telephone: 954/426-8091

November 19, 2008

Florida Department of State
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Dance Town of Palm Beach LLC
#26-3559542

Gentlemen:

I am writing to you on behalf of the above-referenced corporation. Enclosed is an original signed and dated Articles of Organization for Florida Limited Liability Company – Dance Town of Palm Beach LLC.

Also enclosed is a check in the amount of \$160.00:

| | |
|----------------|---|
| \$125.00 | Filing Fee for Articles of Organization and Designation of Registered Agent |
| \$ 30.00 | Certified Copy |
| <u>\$ 5.00</u> | Certificate of Status |

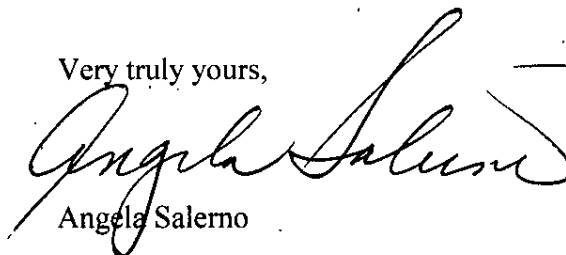
\$160.00

Should you have any further questions, please feel free to contact me at the telephone number listed above. Also you may contact the Registered Agent:

Manuel E. Castro
19245 SW 41st Street
Miramar, FL 33029
305/335-3870

Thank you.

Very truly yours,



Angela Salerno

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DANCE TOWN OF PALM BEACH 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:

7429 SOUTH MILITARY TRAIL

LAKE WORTH, FL 33463

Mailing Address:

SAME

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:

MANUEL E. CASTRO

Name

19245 SW 41 STREET

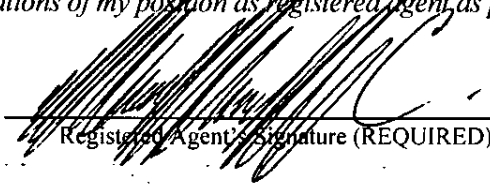
Florida street address (P.O. Box **NOT** acceptable)

MIRAMAR 33029

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)

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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

"MGRM" = Managing Member

Name and Address:

MGR

MANUEL E. CASTRO

19245 SW 41 STREET

MIRAMAR, FL 33029

MGR

LORY CASTRO

19245 SW 41 STREET

MIRAMAR, FL 33029

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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.)

MANUEL E. CASTRO

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)