# LBB00112787

(Requestor's Name)				
(Address)				
(Address)				
(Audiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Enuty Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only

G. MCLEOD

DEC 10 2008

**EXAMINER** 



800138417498

12/05/08--01032--003 \*\*160.00

08 DEC -9 PM 12: 04

## 5300 W. Atlantic Avenue Suite 700 Delray Beach, FL 33484

December 4, 2008

Via Fedex #796160325554

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Building Block Partners, LLC

To Whom It May Concern:

Please find enclosed Check #1789 for One Hundred Sixty Dollars (\$160) as Filing Fee, Certificate of Status & Certified Copy Fee together with the Articles of Organization for Building Block Partners, LLC. A return Fedex airway bill is included for your convenience.

If you need any additional information please contact the undersigned at 561/900-1861.

Sharmini Everett

Thank you

**Executive Assistant** 

Enclosures: Check

Fedex Airbill #797157021712

\everett\corporations\BBP LLC ltr120408 se

## **COVER LETTER**

TO:	_	tion Section of Corporations		
SUBJE	ECT:	BUILDING BLOCK	LARTNERS, LL d Liability Company)	.c
The en	closed Artic	eles of Organization and fee(s) are s	ubmitted for filing.	
Please	return all co	prrespondence concerning this matte	er to the following:	
		JOSEPH	LETZELTER Name of Person)	and all the second seco
		(1	Name of Person)	
		(	Firm/Company)	
	5	300 W. ATLANTIC	AVENUE, SU	ATE 700
		300 W. ATLANTIC	(Address)	•
		DELRAY BEACH	5 Ft 33484 (State and Zip Code)	
		(City)	State and Zip Code)	
For fur	ther informa	ation concerning this matter, please	call:	
		Name of Person)	at ( <u><b>56</b> 1</u> ) <u><b>999 - 0</b></u> (Area Code & Daytime Tele	2710 xt 101 ephone Number)
Enclos	ed is a che	ck for the following amount:		
<b>\$125</b> .4	00 Filing F	ee \$\sumsymbol{\sumsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\sun}\sin\sin\sin\sin\sin\sin\sin\sin\sin\sin	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name
------------------

The name of the Limited Liability Company is:

#### **ARTICLE II - Address:**

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

**Principal Office Address: Mailing Address:** 

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:

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

DELRAY BEACH FL 33 484

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 n.y 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)

ARTICLE IV- Manager(s) or Managing Member(s):

1.00

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Me	Name and Address:
MGRM	THAD PRYOR  5300 W. ATLANTIC AVE. # 700  DELPAY BEACH, FL 33484
<del></del>	JIM PERRETTY 5300 W. ATLANIC AVE, #700 DELPAY BEACH, FL 33484
	STEVE VENTO 5300 W. ATLANTIC AVE, #700 DELRAY BEACH, FL33484
	JOSEPH LETZELTER 5300 W. ATLANTIC AVE, #700 DELPAY BEACH, FLB3484
(Use attachment if necessar	ry)
	er than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days p g.)
REQUIRED SIGNATUR	E:
Signature	of a member or an authorized representative of a member.
of this doc	ance with section 608.408(3), Florida Statutes, the execution ument constitutes an affirmation under the penalties of perjury facts stated herein are true.)
THA	ND PRYOR

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)

Typed or printed name of signee