

L0800015415

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000276165 3))



H080002761653ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
 Division of Corporations
 Fax Number : (850) 617 6383

From:
 Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
 Account Number : 120000000019
 Phone : (305) 552-5973
 Fax Number : (305) 220-1440

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 DEC 18 AM 10: 25

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RK 17600-17632 COLLINS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED
08 DEC 18 PM 1: 17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

G. MCLEOD

DEC 19 2008

12/18/2008 10:09 AM

EXAMINER

H08000276165

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RK 17600-17632 Collins, 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:

Mailing Address:

17100 Collins Avenue, Ste 225
Sunny Isles Beach, FL 33160

17100 Collins Avenue, Ste 225
Sunny Isles Beach, FL 33160

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:

Mitchell Cutler

Name

17100 Collins Avenue, Ste 225

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

Sunny Isles Beach, FL 33160

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.

Mitchell Cutler

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H08000276165

08 DEC 18 AM 10:25

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

H08000276165

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:

MGRM

Raanan Katz
16402 Collins Avenue, #P146
Swamy Isles Beach, FL 33160

MGR

Daniel Katz
248 Park Drive
Bal Harbour, FL 33154

(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.)

Raanan Katz
Typed or printed name of signer

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)

H08000276165