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EXAMINER

COVER LETTER

TO: Registration Division of C			
SUBJECT: Figtree		11:17:0	
	(Name of Limi	ted Liability Company)	,
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
Rene G. Sag	gebien		
		(Name of Person)	
Figtree Trac	ling, LLC		
		(Firm/Company)	71, 00
2127 Bricke	ll Avenue, Suite 3405		09 FEB - 2 PH
		(Address)	2 6
Miami, Florid	da 33129		A P
	(Ci	ty/State and Zip Code)	
For further information	concerning this matter, pleas	e call:	
Rene G. Sagebier	1	at (305) 978-4058	•
(Nam	e of Person)	(Area Code & Daytime Te	lephone Number)
Enclosed is a check f	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	is .

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company i	S:		
Figtree Trading, LLC (Must end with the words "Limited Lia	bility 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:		
2127 Brickell Avenue, Suite 3405 Miami, Florida 33129	2127 Brickell Avenue, Suite 3405 Miami, Florida 33129		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the	ristered Agent. You must designate an individual or another		
Rene G. Sagebien			
Nam	SSEL S		
2127 Brickell Avenue, Suite 3405			
Florida street address (P.O. Box NOT acceptable)			
Miami, Florida 33129 FL City, State, and Zip			
City, State	e, and Zip		
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	o accept service of process for the above stated limited a this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S		
Ž.			
Registered Agent's Sign	muie (vecouver)		

(CONTINUED)
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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member Rene G. Sagebien MGR 2127 Brickell Avenue, Suite 3405 Miami, Florida 33129 (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.

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)

Rene G. Sagebien

that the facts stated herein are true.)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee