

# L09000028556

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.**

((H09000069342 3)))



H090000693423ABC0

**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 : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 MAR 24 AM 7:44

FILED

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**SMITH & SONS ENT, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

**C. LEWIS**

**MAR 25 2009**

**EXAMINER**

RECEIVED  
09 MAR 24 PM 4:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

#09000069342.3

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

In compliance with Chapter 608, F.S.

2009 MAR 24 AM 7:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**ARTICLE I NAME**

The name of the Limited Liability Company is:

SMITH &amp; SONS ENT, LLC

**ARTICLE II ADDRESS**

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

766 SE 5TH AVENUE

DELRAY BEACH, FLORIDA 33483

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent are:

A1A REGISTERED AGENT INC.

5647 110TH AVENUE NORTH

ROYAL PALM BEACH, FLORIDA 33411

Having been named as registered agent 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.

*Tina Maki* TINA MAKI PRES 3/24/09  
A1A REGISTERED AGENT INC. / Registered Agent's signature

#09000069342.3

PAGE 2 SMITH &amp; SONS ENT, LLC

H-09000069342-3

**ARTICLE IV MANAGEMENT**

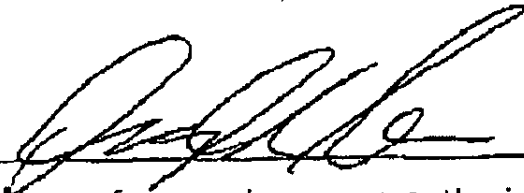
The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS (optional)**

MANAGING MEMBER  
DOUGLAS SMITH  
766 SE 5TH AVENUE  
DELRAY BEACH, FLORIDA 33483

FILED  
2009 MAR 24 AM 7:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

.....

x 

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.

DOUGLAS SMITH

H-09000069342-3