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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

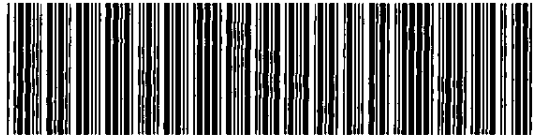
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TALLAHASSEE, FLORIDA

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B. KOHR

MAR 30 2009

EXAMINER

*Law Offices*  
*Karp & Langerman, P.C.*  
*Milford Place Corporate Center*  
*185 Plains Road*  
*Milford, Connecticut 06461*

JOEL C. KARP  
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LAWRENCE LANGERMAN  
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MILFORD (203) 876-0606  
WESTPORT (203) 866-5892  
FAX (203) 876-0768

March 24, 2009

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

Re: 5 Forest Glen Associates LLC

Dear Sir:

Enclosed is the Cover Letter and Articles of Organization for the above LLC for filing as a Florida Limited Liability Company.

A check in the amount of \$125.00 made payable to the Florida Department of State to cover the filing fee is also enclosed.

Please call me if you have questions.

Very truly yours,



Joel C. Karp

Encls.

cc: Phyllis and Ronald Shaw

shaw/ltr/Florida Registration-09.1024

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 5 Forest Glen Associates LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joel C. Karp, Esq.

(Name of Person)

Karp & Langerman, P.C.

(Firm/Company)

185 Plains Road, Suite 209E

(Address)

Milford, CT 06461

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Joel C. Karp, Esq.

(Name of Person)

at ( 203 ) 876-0606

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

5 Forest Glen Associates 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:

1038 Grand Isle Terrace  
Palm Beach Gardens, FL 33418

#### Mailing Address:

1038 Grand Isle Terrace  
Palm Beach Gardens, FL 33418

### 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:

Phyllis Shaw

Name

1038 Grand Isle Terrace

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

Palm Beach Gardens, FL 33418

City, State, and Zip

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SOUTHERN STATE

*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)

(CONTINUED)

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