

L09000034677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

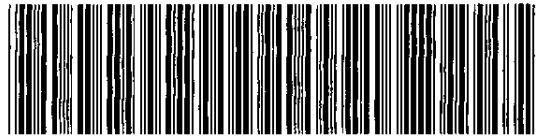
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600148216276

04/03/09--01026--021 **130.00

EFFECTIVE DATE

4/2/09

B. KOHR

APR 10 2009

EXAMINER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 APR -3 AM 9:15

FILED

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Jerusalem Stone, 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:

Iosif Francisc Csendes

(Name of Person)

Jerusalem Stone, LLC

(Firm/Company)

2600 NE 5TH AVE

(Address)

Boca Raton, FL 33431

(City/State and Zip Code)

FILED
09 APR -3 PM 9:15
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 4/2/09

For further information concerning this matter, please call:

Iosif Francisc Csendes

(Name of Person)

at (561) 441-6935

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2009

IOSIF FRANCISC CSENDES
2600 N.E. 5TH AVENUE
BOCA RATON, FL 33431

SUBJECT: JERUSALEM STONE, LLC
Ref. Number: W09000015800

EFFECTIVE DATE 4/2/09

FILED
09 APR -3 AM 9:15
TALLAHASSEE, FLORIDA

We have received your document for JERUSALEM STONE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$130.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 209A00011412

EFFECTIVE DATE 4/2/09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jerusalem Stone Restoration, 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:

2600 NE 5TH AVE

Boca Raton, FL 33431

Mailing Address:

2600 NE 5TH AVE

Boca Raton, FL 33431

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:

Iosif Francisc Csendes

Name

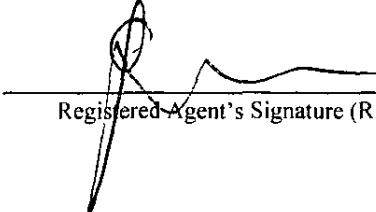
2600 NE 5TH AVE

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

Boca Raton FL 33431

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..



Registered Agent's Signature (REQUIRED)

(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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

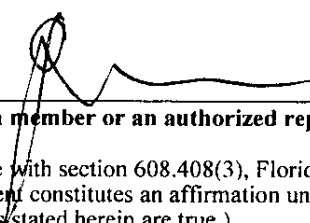
Iosif Francisc Csendes

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 04.02.09. (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.)

Iosif Francisc Csendes

Typed or printed name of signee

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)