# 10900035714

(Requ	uestor's Name)	
(Addı	ess)	
(Addı	ess)	
(City/	State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL.
(Busi	ness Entity Nam	e)
(Doct	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
		:
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Office Use Only

G. MCLEOD

APR 14 2009

**EXAMINER** 



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OF APP 13 AMIL.

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
cup u	ECT: L. Silverton Properties,	LLC
SORTI		ited Liability Company)
The en	closed Articles of Organization and fee(s) are	e submitted for filing.
Please	return all correspondence concerning this ma	utter to the following:
	Patricia Touchstone	
		(Name of Person)
	Strategic Corporate Service	es Plus, Inc
		(Firm/Company)
	1500 Ave F. Suite 3	
		(Address)
	Ely, NV 89301	
	(C	ity/State and Zip Code)
For fur	ther information concerning this matter, plea	se call:
Patr	icia Touchstone	at ( 775 ) 289-2789
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclos	sed is a check for the following amount:	
\$125	.00 Filing Fee \$\sum \$130.00 Filing Fee & Certificate of Status	✓\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy 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

The name of the Limited Liability Company	is:	
L. Silverton Properties, LLC		
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liabili	ty Company is:
Principal Office Address:	Mailing Address:	
1800 SE Ranch Road		
Jupiter, FL 33478		
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	egistered Agent. You must designate an individual of	nature: or another
The name and the Florida street address of the	ne registered agent are:	SECHETAN VISION DE L <b>09 APR 13</b>
<u>Devendra Sharma</u>	<u> </u>	
Na	ime	등 유로
1800 SE Ranch R	oad	<u> </u>
	address (P.O. Box NOT acceptable)	A Company
Jupiter	<sub>FL</sub> 33478	
City, Sta	te, and Zip	·// 59
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re	in this certificate, I hereby accept the appactive. I further agree to comply with the performance of my duties, and I am fan	pointment as provisions of all uiliar with and

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

#### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

	per
MGRM	Devendra Sherma
	1800 SE Ranch Road
	Jupiter, FL 33478
(Use attachment if necessary)	) 
-	
LE v: Effective date, if other fective date is listed, the date	than the date of filing: (OPTIONAL must be specific and cannot be more than five business day
days after the date of filing.)	

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.)

#### Devendra Sharma

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)