

LU9000037197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

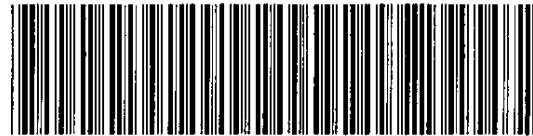
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900149909409

04/16/09--01006--003 \*\*155.00

RECEIVED  
09 APR 16 AM 9:55  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS  
SECRETARY OF STATE

FILED  
09 APR 16 PM 1:15  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

B. KOHR

APR 17 2009

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

CONTACT: ASHLEY SMITH  
DATE: 04-16-2009  
REF. #: 000466.102770  
CORP. NAME: GHITIS FAMILY LP, LLC

FILED  
09 APR 16 PM 1:15  
TALLAHASSEE, FLORIDA

- |                                                      |                                                 |                                                       |
|------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |                                                 |                                                       |
| <input type="checkbox"/> OTHER:                      |                                                 |                                                       |

STATE FEES PREPAID WITH CHECK# 529940 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |                                                    |                                                       |                                             |
|----------------------------------------------------|-------------------------------------------------------|---------------------------------------------|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |                                                       |                                             |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 16, 2009

ASHLEY SMITH  
CORPDIRECT AGENTS  
TALLAHASSEE, FL

SUBJECT: GHITIS FAMILY LP, LLC  
Ref. Number: W09000017894

RECEIVED  
09 APR 17 AM 11:02  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
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TALLAHASSEE, FLORIDA  
PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.  
4/16

We have received your document for GHITIS FAMILY LP, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

"LP" is a limited partnership suffix. So Florida LLC's can't use "LP LLC" at the end of their names.

Please note that we have RETAINED your \$155.00 payment.

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: 409A00012785

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.  
4/16

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF**

Ghitis Family Partner, LLC

**ARTICLE I. Name:** The name of the Limited Liability Company is Ghitis Family Partner, LLC (the "**Company**").

**ARTICLE II. Address:** The mailing address of the principal office of the Company is 4651 Sheridan Street, Suite 303, Hollywood, FL 33021. The street address of the principal office of the Company is 4651 Sheridan Street, Suite 303, Hollywood, FL 33021.

**ARTICLE III. Registered Agent, Registered Office & Registered Agent's Signature:** The name and the Florida street address of the Company's registered agent are:

Leo Ghitis  
4651 Sheridan Street  
Suite 303  
Hollywood, FL 33021

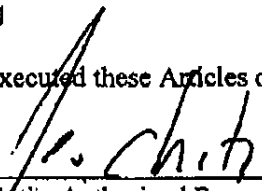
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 in Chapter 608, Florida Statutes.*

  
Leo Ghitis

**ARTICLE IV. Management:** The Company is to be manager-managed, and is therefore, a manager-managed company. The name and address of the initial manager is:

Leo Ghitis  
4651 Sheridan Street  
Suite 303  
Hollywood, FL 33021

**IN WITNESS WHEREOF,** the undersigned has executed these Articles of Organization this 14<sup>th</sup> day of April, 2009.

  
Leo Ghitis, Authorized Representative

(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.)