

L09000046436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF INFORMATION
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

MAY 13 2009

EXAMINER

Charter Number Only

5/12/09

TERMINELLO & TERMINELLO

Requestor's Name

2700 SW 37 AVENUE

Address

MIAMI, FL 33133

City

State

ZIP

Phone

(305) 444-5002

VALIDATION ONLY

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TALLAHASSEE, FLORIDA

CORPORATION(S) NAME

BIJAN'S CORAL GABIES, LLC

☐ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Reinstatement

☐ Reservation

☒ Other LLC
☐ Change of Registered Agent

☐ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

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Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier

 Empire Toll Free: 1-800-432-3028

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BIJAN'S CORAL GABLES, 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:

LOUIS J. TERMINELLO

(Name of Person)

TERMINELLO & TERMINELLO, P.A.

(Firm/Company)

2700 SW 37TH AVENUE

(Address)

MIAMI, FLORIDA 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

LOUIS J. TERMINELLO at (305) 444-5002
(Name of Person) (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

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BIJAN'S CORAL GABLES, 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:

2601 HALISSEE STREET
COCONUT GROVE, FLORIDA 33133

Mailing Address:

2601 HALISSEE STREET
COCONUT GROVE, FLORIDA 33133

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:

TERMINELLO & TERMINELLO, P.A.

Name


2700 SW 37TH AVENUE

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

MIAMI, FL 33133 FL

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)

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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

BIJAN NAKHJAVAN

2601 HALISSEE STREET

COCONUT GROVE, FLORIDA 33133

MGRM

FARHANG ROUHANI

2601 HALISSEE STREET

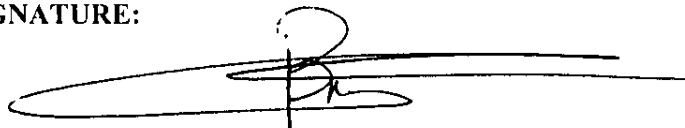
COCONUT GROVE, FLORIDA 33133

(Use attachment if necessary)

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

BIJAN NAKHJAVAN

Typed or printed name of signer

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)