

L09000049 706

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000127112 3)))



H090001271123ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BAKER & MCKENZIE
Account Number : 074222002135
Phone : (305) 789-8900
Fax Number : (305) 789-8953

FILED
09 MAY 21 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

250 Via Linda LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

D. BRUCE

MAY 22 2009

EXAMINER**RECEIVED**

09 MAY 21 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

(((H09000127112 3)))

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 250 Via Linda 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:

Stewart L. Kasner, Esq.
Name of Person

Baker & McKenzie LLP
Firm/Company

1111 Brickell Avenue, Suite 1700
Address

Miami, Florida 33131
City/State and Zip Code

stewart.kasner@bakernet.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stewart L. Kasner, Esq. at (305) 789-8940
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

(((H09000127112 3)))

FILED
09 MAY 21 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(((H09000127112 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

250 Via Linda 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:250 Via Linda
Palm Beach, Florida 33480-3405**Mailing Address:**c/o Andrew Thomka-Gazdik
180 Royal Palm Way, Suite 201
Palm Beach, Florida 33480**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:

Andrew Thomka-Gazdik

Name

180 Royal Palm Way, Suite 201Florida street address (P.O. Box NOT acceptable)Palm Beach, FL 33480

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)

(((H09000127112 3)))

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 MAY 21 AM 10:15

(((H09000127112' 3)))

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:MGRAndrew Thomka-Gazdik180 Royal Palm Way, Suite 201Palm Beach, Florida 33480MGRJulian D. Thomka-Gazdik111 Stone Bridge LaneBedford Hills, New York 1050709 MAY 21 AM 10:15
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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.)

Stewart L. Kasner, Esq.

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)

Page 2 of 2

(((H09000127112' 3)))...