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SECRETARY OF STATE DIVISION OF CORPORATIONS

Office Use Only

309-2745

T. HAMPTON

JUN 2 4 2009

EXAMINER

COVER LETTER

то:	Registration Se Division of Cou					•
SURII	UBJECT: SOBEL, LLC					
Name of Limited Liability Company				npany		
The en	closed Articles of	Organization and fee(s) are	submit	ted for fil	ing.	
Please	return all correspo	ondence concerning this ma	tter to th	ne followi	ing:	
		N/		BERG	ER	
			Name	of Person		
	SOBEL, LLC					
	Firm/Company					
	1603 ABACO DRIVE, APT D-1					
			Ad	dress		
	COCONUT CREEK, FL 33066					
				and Zip Co		
	, , , , 	bbeacl E-mail address: (to be used	nbum(for futur	@bellso	outh.net	n)
For fur	ther information c	oncerning this matter, pleas	e call:			
		Y SOBEL f Person	_ at (561) ode & Davtime	926-0965 Telephone Number
_	sed is a check for	the following amount: \$130.00 Filing Fee & Certificate of Status	C	55.00 Fil ertified C	ling Fee &	\$160.00 Filing Fee, Certificate of Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registr Division Clifton 2661 E	Courier Addration Section on of Corporation Building executive Centures FL 3230	ions er Circle



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

09 JUN 23 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

June 11, 2009

NAOMI BERGER 1603 ABACO DR APT D-1 COCONUT CREEK, FL 33066

SUBJECT: SOBEL, LLC Ref. Number: W09000027415

We have received your document for SOBEL, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L05000052917 (SOBEL LLC).

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Division of Comparations D.O. POV 6997 Tallahassas Florida 99214

Letter Number: 309A00019724

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company					
SOBE1	_,LLC				
SOBEL					
(Must end with the words "Limited Lie	ability 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:	Mailing Address: 1603 ABACO DRIVE, APT D-1 COCONUT CREEK, FL 33066				
1603 ABACO DRIVE, APT D-1 COCONUT CREEK, FL 33066					
	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:				
BARRY	SOBEL				
Nan					
8290 NADM	IAR AVENUE				
	O. Box NOT acceptable)				
BOCA RATON, 3343	4 _{FL}				
City, State	e, and Zip				
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S				

(CONTINUED)

DIVISION OF CORPORATIONS

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Mer	Name and Address:				
PRES/CEO	NAOMI BERGER 1603 ABACO DRIVE, APT D-1 COCONUT CREEK, FL 33066				
(Use attachment if necessar	y)				
TTICLE V: Effective date, if other an effective date is listed, the date of filing	er than the date of filing: (OPTIONAL) te must be specific and cannot be more than five business days pri s.)				
<u>REQUIRED</u> SIGNATURE					
Wison	ni Perser				
Signature o	Signature of a member of an authorized representative of a member.				
(In accorda of this doc	(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.)				
	NAOMI BERGER				
	Typed or printed name of cionee				

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)