# L09000063181

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2009 JUN 15 AM 10: 20
SECRETARY OF STATE

C. LEWIS
JUN 39, 2009
EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	Treasure Realty, LLC.
	Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Mahmoud Heiba
	Name of Person
	Firm/Company
	9173A Sun Terrace Cr.  Address
	Lake Park, FL 33403
	City/State and Zip Code
-	mheiba@heiba.com  E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	at ()
	Name of Person Area Code & Daytime Telephone Number
Enclos	ed is a check for the following amount:
<b>/</b> ]\$125.	00 Filing Fee \$\bigcip\\$130.00 Filing Fee & \$\bigcip\\$155.00 Filing Fee & \$\bigcip\\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 16, 2009

MAHMOUD HEIBA 9173A SUN TERRACE CR. LAKE PARK, FL 33403

SUBJECT: TREASURE REALTY, LLC.

Ref. Number: W09000028062

We have received your document for TREASURE REALTY, 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.

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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 709A00020371

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
N.H. Premeir	
Trèasure Real	ty, LLC.
(Must end.with the words "Dimited Liabil	ity Company," "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9173A <sup>-</sup> Sun Terrace Cr.	9173A Sun Terrace Cr.
Lake Park, FL 33403	Lake PArk, FL 33403
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the remainder of	egistered agent are:
Name	SS (2)
9173A Sun Te	errace Cr.  Box NOT acceptable)  FI 28
Florida street address (P.O.	Box NOT acceptable)
Lake Park, FL 33403	DRIE 2
City, State, ar	
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	iccept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)

### Page 1 of 2

## FILED

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	ARTICLE IV- Ma The name and addre	mager(s) or Managess of each Manager	ing Member(s): or Managing Member is as follows:	2009 JUN	15 AM 10:
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing: June 15, 2009 (OPTIONAL)  If an effective date is listed, the date must be specific and cannot be more than five business days prior o 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 penalities of perjury that the facts stated herein are true.)  Mahmoud: Heiba  Typed or printed name of signee	<u>Title:</u> "MGR" = Manager			CCCDA	ARTHE JIMA
ARTICLE V: Effective date, if other than the date of filing:	MGRM		9173A Sun Terrace Cr.		
ARTICLE V: Effective date, if other than the date of filing:					
ARTICLE V: Effective date, if other than the date of filing:					
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.)  Mahmoud Heiba  Typed or printed name of signee	-	• ,	to office Tune 15 2009	(ODTIO	NIAI \
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.)  Mahmoud Heiba  Typed or printed name of signee	f an effective date is listed	, the date must be s			
(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.)  Mahmoud Heiba  Typed or printed name of signee	REQUIRED SIGN	ATURE:	Africa		
of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)  Mahmoud Heiba  Typed or printed name of signee	Si	gnature of a member o	r an authorized representative of a mem	ber.	
Typed or printed name of signee	of	f this document constitut	tes an affirmation under the penalties of per	on rjury	
		. p	Mahmoud Heiba		
Filing Fees:	-	Typed	or printed name of signee		
- 100 A 7 - 00-1	Filing Fees:				

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)