L09000011780

(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



600158525716

07/24/09--01005--021 **130.00

PILED 09 JUL 24 PH 12: 15 SECRETARY OF STATE SECRETARY OF STATE

COVER LETTER

Registration Section

TO:

Division o	f Corporations			her.
SUBJECT:	2860	NE ·	16 Street LLC	}
	Name of Limi	ted Liab	ility Company	
The enclosed Article	es of Organization and fee(s) are	submitte	ed for filing.	
Please return all cor	respondence concerning this mat	ter to the	e following:	
	D		Scavone	
		Name o	of Person	
	2860	NE 16	Street LLC	
		Firm/C	Company	
	121	5 SE 1	I3 Avenue	
	•	Ado	dress	
*	Deerfie	eld Bea	ach, FL 33441	
	Cit	ty/State a	nd Zip Code	
			ellsouth.net	
	E-mail address: (to be used		e annual report notifica	tion)
For further informat	ion concerning this matter, pleas	e call:		
De	nise Scavone	at (954)	849-0218
Na	ime of Person		Area Code & Daytin	ne Telephone Number
Enclosed is a chec	k for the following amount:			
]\$125.00 Filing Fe	Certificate of Status	Ce	55.00 Filing Fee & rtified Copy ditional copy is enclose	S160.00 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 Ad Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	n rations enter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		6 Street LLC			
(Mi	ust end with the words "Limited	Liability Company," "L.L.C.," or "LLC.")			
ARTICLE II - Ad	ldress:				
The mailing address	ss and street address of t	the principal office of the Limited Lia	bility Con	npany	is:
Principal Office A	<u>ddress:</u>	Mailing Address:			
1215 SE 13 Aver	nue	1215 SE 13 Avenue			
Deerfield Beach,	FL 33441	Deerfield Beach, FL 33441			
		the registered agent are: se Scavone	CRETARY (LAHASSEE	JUL 24 PM 12: J:5	
			FLS	2	grammer de la company
	1215 SE 13 Avenue Florida street address (P.O. Box NOT acceptable)		DRET A	 	, Carrier
	Deerfield Beach	•	2111	٠.	
		FL 33441 tate, and Zip			
liability compa	ny at the place designate	nd to accept service of process for the a d in this certificate, I hereby accept the pacity. I further agree to comply with a	e appointm	ent as	;

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:		Name and Address:	
"MGR" = Manager "MGRM" = Managin	g Member		
MGR		Denise Scavone	
		Denise Scavone 1215 SE 13 Avenue	
		Deerfield Beach, FL 33441	
			<u></u>
(Use attachment if ne	cessary)		
effective date is listed, 10 days after the date o <u>REQUIRED</u> SIGNA	the date must be s f filing.) ATURE:	ate of filing: specific and cannot be more than five	business days prio
		<u>-</u>	. S ⊙
of t	accordance with section	on 608.408(3), Florida Statutes, the execution	
	this document constitute the facts stated herein	ites an affirmation under the penalties of perjunare true.)	
	the facts stated herein	n are true.)	JUL 24 RETAR AHASS
	the facts stated herein	ites an affirmation under the penalties of perju n are true.) Denise Scavone d or printed name of signee	JUL 24 P
Filing Fees:	the facts stated herein	n are true.) Denise Scavone	
Filing Fees:	the facts stated herein Typed or Articles of Organia	n are true.) Denise Scavone	انعاق سوست بالل

\$ 5.00 Certificate of Status (Optional)