

### 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.

(((H090001857063)))



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

Account Name : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335

Phone : (305)599-0839

: (305)716-0346



## FLORIDA/FOREIGN LIMITED LIABILITY CO.

### 746 SW WOODCREEK DRIVE, LLC



| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | 1        |
| Page Count            | 03       |
| Estimated Charge      | \$155.00 |

C. LEWIS

AUG 2 1 2009

**EXAMINER** 

Electronic Filing Menu

Corporate Filing Menu

Help

FILED

2009 AUG 20 AM 8: 18

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 ~ Name:

The name of the Limited Liability Company is:

746 SW Woodcreek Drive, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

2126 NW Fork Road Stuart, Florida 34994

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Rodney S. Graves
Name

2126 NW Fork Road

Florida street address (P.O. Box not acceptable)

Stuart, Florida 34994

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

Frank A. Ferraro, CPA, PA / 3601 SE Ocean Boulevard, Ste. 005 Stuart, Florida 34996 772-283-5001

# FILED

### 2009 AUG 20 AM 8: 18

SECRETARY OF STATE TALLAHASSEE, FLORIDA

### ARTICLE IV - Manager(s) or Managing Member(s):

Title

The name and address of each Manager or Managing Member is as follows:

| <u>Title</u><br>"MGR" – Manager<br>"MGRM" – Managing Member | Name and Address:                                  |
|---|--|
| MGRM  |  |
|   | Rodney S. Grayes                                   |
|   | 2126 NW Fork Road                                  |
|   | Stuart, Florida 34994                              |
|   |  |
|   |  |
| ,   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| REQUIRED SIGNATURE:   |  |
|   | Eshan & Other                                      |
| Signature of a memb   | er or an authorized representative of a member     |
| (In accordance with s                                       | ection \$08.408(3) Florida Statutes, the execution |
|   | titutes an affirmation under penalties of perjury  |
| that the facts stated he                                    | **   |
| Rodney S. Crave   | 5  |
| Typed or prin   | ited name of signee                                |

Frank A. Ferraro, CPA, PA . 3601 SE Ocean Boulevard, Suite 005 Stuart, Florida 34996 772-283-5001

# FILED

2009 AUG 20 AM 8: 18

SECRETARY OF STATE TALLAHASSEE, FLORIDA

### ARTICLE IV - MANAGEMENT (Check if applicable)

X The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

(An additional article must be added if an effective date is requested)

(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)

Rodney S. Graves

Typed or printed name of signee

Frank A. Ferraro, CPA, PA 3601 SE Ocean Boulevard, Stc. 005 Stuart, Florida 34996 772-283-5001