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| (Ci | ty/State/Zip/Phone | ⇒ #) |
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| PICK-UP | ☐ WAIT | MAIL |
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| (Bu | isiness Entity Nan | ne) |
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| · · (Do | ocument Number) | |
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| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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T. HAMPTON

DEC - 4 2009

EXAMINER

COVER LETTER

| | on Section f Corporations | | |
|-----------------------|---|--|--------|
| SUBJECT: | The Alexa | ander Organization, LLC | |
| | | ited Liability Company | - |
| The enclosed Articl | es of Organization and fee(s) are | submitted for filing. | |
| Please return all cor | respondence concerning this ma | tter to the following: | |
| | Ma | ary E. Alexander | |
| | | Name of Person | |
| | The Alexa | nder Organization, LLC | |
| | | Firm/Company | |
| | 266 | 60 SE 13th Court | |
| | | Address | |
| | Pompa | ino Beach, FL 33062 | |
| | | ity/State and Zip Code | |
| | maryea | alexander1@aol.com for future annual report notification) | |
| For further informat | ion concerning this matter, pleas | • | |
| | y E. Alexander | at (954)933-7691 Area Code & Daytime Telephone Number | _ |
| Enclosed is a chec | k for the following amount: ee \$\int\$\$130.00 Filing Fee & Certificate of Status | \$155.00 Filing Fee & \$160.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) | atus & |
| | 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 | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ation, LLC |
|---|
| ompany," "L.L.C.," or "LLC.") |
| oal office of the Limited Liability Company is: |
| ailing Address: |
| 660 SE 13th Court |
| ompano Beach, FL 33062 |
| ice, & Registered Agent's Signature: Agent. You must designate an individual or another |
| ered agent are: |
| tered agent are: |
| tered agent are: |
| nder |
| court |
| nder |
| |

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)

SECRETARY OF STATE
SIVISION 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:

| | er | Name and Address: |
|--|--|---|
| "MGRM" = Mana | iging Member | |
| MGR | _ | Mary E. Alexander |
| | | 2660 SE 13th Court |
| | | Pompano Beach, FL 33062 |
| | | |
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| | | |
| | | |
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| | _ | |
| (Use attachment is | f necessary) | |
| (CSC actacimicity is | necessary y | |
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| CLE V: Effective d | ate, if other than the | date of filing: (OPTIONAL |
| effective date is list | ed, the date must be | date of filing: (OPTIONAL specific and cannot be more than five business days |
| effective date is liste O days after the dat | ed, the date must be te of filing.) | date of filing: (OPTIONAL e specific and cannot be more than five business days |
| effective date is liste 0 days after the dat <u>REQUIRED</u> SIG | ed, the date must be te of filing.) SNATURE: | e specific and cannot be more than five business days |
| effective date is liste 0 days after the dat REQUIRED SIG | ed, the date must be te of filing.) SNATURE: | e specific and cannot be more than five business days |
| effective date is liste 0 days after the dat <u>REQUIRED</u> SIG | ed, the date must be te of filing.) SNATURE: Signature of a member (In accordance with section) | e specific and cannot be more than five business days conclusion or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution |
| effective date is liste 0 days after the dat <u>REQUIRED</u> SIG | ed, the date must be te of filing.) SNATURE: Signature of a member (In accordance with section) | r or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury |
| effective date is liste 0 days after the dat <u>REQUIRED</u> SIG | ed, the date must be te of filing.) SNATURE: Signature of a member of this document constituted that the facts stated here | r or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury ein are true.) Mary E. Alexander |
| effective date is liste 0 days after the dat <u>REQUIRED</u> SIG | ed, the date must be te of filing.) SNATURE: Signature of a member of this document constituted that the facts stated here | r or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury ein are true.) |

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)