L 10000028955

(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:			
_			
<u> </u>			

Office Use Only



600171981486

03/15/10--01007--014 **125.00

T. CLINE

MAR 16 2010

EXAMINER

SECRETARY OF STATE

COVER LETTER

Registration Section

TO:

Division of	Corporations		
SUBJECT: 2906	Fairmont Street, LLC		
SUBJECT:		ted Liability Company	
The enclosed Articles	s of Organization and fee(s) are	submitted for filing.	
Please return all corre	espondence concerning this mat	tter to the following:	
Joe Shinga	ry		
		Name of Person	
		Firm/Company	
2336 S Eas	t Ocean Blvd #333	Address	
		Address	
Stuart, Flori		the Carte and Tim Code	
shingary@c	comcast.net	for future annual report notification)	
For further information	on concerning this matter, pleas		
Joe Shingary		at (772)463 6686 ₹¢ ≥	
Nar	ne of Person	Area Code & Daytime Telephone Number CR ARE AS AS	
Enclosed is a check	for the following amount:	<u>%</u> 5	רן וו
☑\$125.00 Filing Fee	e \$\bmathbb{\textbf{1}}\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing cee, Certificate of Status	C
	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

ARTICEES			11 COM ZEVI
ARTICLE I -	Name:		
The name of th	ne Limited Liability	Company is:	
2906 Fairmo	ent Street, LLC		
	<u> </u>	"Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing ad		ress of the principal office of the Limited Lia	ability Company is:
Principal Offi	ce Address:	Mailing Address:	
2336 S. East Ocea	n Blvd #333	2336 S. East Ocean Blvd #333	
Stuart, Fl 34996		Stuart, FI 34996	
(The Limited Liabil	- Registered Agent ity Company cannot serve th an active Florida registra	t, Registered Office, & Registered Agent's as its own Registered Agent. You must designate an indivition.)	Signature: dual or another
The name and	the Florida street add	dress of the registered agent are:	
	Joe Shingary		7. 2
	-11,111,111,111	Name	2010 MAR 2010 MAR SECRET/
	2336 S East 0	Ocean Blvd #333	MAR AHA
	FI	orida street address (P.O. Box NOT acceptable)	R 15
	Stuart	FL 34996	

Having been named as registered agent and to accept service of process for the about stated 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.

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)
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>	Name and Address:		
"MGR" = Manager			
"MGRM" = Managing Member			
MGR	Joe Shingary		
	2336 S East Ocean Blvd #333	<u> </u>	
	Stuart, FI 34996	_	
MGRM	Cartaban Carbal		
MOTAN	Gretchen Gaebel	—	
	2336 S East Ocean Blvd #333		
	Stuart, FI 34996	_	
		_	
	- Market		
	·	_	
		_	
(Use attachment if necessary)	•		
ADTROLE W. Effective data if advantage design	te of filing: April 1, 2010		`
ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be s	· · · · · · · · · · · · · · · · · · ·	ge uggae ioi≨arr	prior
to or 90 days after the date of filing.)		20	brion !
	SS	5	(and the same
	تَينَ	7	[1]
<u>REQUIRED</u> SIGNATURE:	E	3	\bigcirc
·		2: (-
	D D D D D D D D D D D D D D D D D D D	1 2	
Signature of a member o	r an authorized repr esentati ve of a member.		
(In accordance with section	on 608.408(3), Florida Statutes, the execution		
	es an affirmation under the penalties of perjury		
Joe Shingary	,		
	or printed name of signee		
Filing Rees:			

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)