## L10000045325

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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## **COVER LETTER**

TO:

Registration Section

Division of Co	orporations					
SURJECT: COLTO	N CREATIVE LLC	٠				
30 <b>2</b> 02011 <u></u>		ed Liability Cor	npany			
The enclosed Articles of	of Organization and fee(s) are	submitted for fi	ling.			
Please return all corresp	oondence concerning this mat	ter to the follow	ing:			
ANDREW I.	COLTON				·· <u>·</u>	
		Name of Person				
COLTON CF	REATIVE LLC			<u></u>	~~	
		Firm/Company		רבי ה קרבי		
7777 GLADE	ES ROAD, SUITE 100			AHA HA	2010 APR	7
		Address		<del>************************************</del>	2	
BOOA BATO	N FL 00404			jne ⊒	<b>2</b>	
BOCA HATC	DN, FL 33434 Cit	y/State and Zip C	Code		<del>`</del>	_
ANDREW@	COLTONCREATIVE.C	•		RA DA	25	
<u> </u>	E-mail address: (to be used	_	report notification)			_
For further information	concerning this matter, please	e call:				
ANDREW I. COLT	·ON	_at (561	<sub>1</sub> 948-0268			
	of Person		ode & Daytime Tele	ephone Number	<del></del>	
Enclosed is a check for	or the following amount:					
□\$125.00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	Certified (additional of		\$160.00 Filin Certificate of Certified Cop (additional copy	Status &	ı
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regist Divisi Clifto 2661	t/Courier Address ration Section ion of Corporation in Building Executive Center (passee FL 32301	s		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC."	")
ARTICLE II - Address:		75 2H
The mailing address and street address of the	ne principal office of the Limit	
Principal Office Address:	Mailing Address:	R 27
7777 GLADES ROAD, SUITE 100	7777 GLADES ROAD	
BOCA RATON, FL 33434	BOCA RATON, FL 334	
		<u> </u>

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

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

ANDREW I. COLTO	)N
	Name
7777 GLADES ROA	AD, SUITE 100
Florida si	treet address (P.O. Box NOT acceptable
BOCA RATON	<sub>FL</sub> 33434
	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 (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:

	R" = Manager RM" = Managing	Member	Name and Address:		
	R/PRES	,	ANDREW I. COLTON 7777 GLADES ROAD, SUITE BOCA RATON, FL 33434	100	
				2010 APR 27	7
(Use :	attachment if nec	essary)		PH 2: 25	ILED
(If an effectiv	: Effective date, in the control of	he date must be sj	te of filing: pecific and cannot be more than fi	(OPTIONA ve business da	AL) ys prior
REO	UIRED SIGNA	Al	r an authorized representative of a men	nher	
	(lp ao	ccordance with section is document constitute the facts stated herein	n 608.408(3), Florida Statutes, the execution an affirmation under the penalties of peare true.)	ion	
		ANDROW I	I or printed name of signee		
	Filing Face	Typed	or printed name or signee		

Filing Fees:

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

\$ 5.00 Certificate of Status (Optional)