Division of orporat ins orida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6383

Account Name

: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number: 075350000353

Phone

: (212)431-5000

; (212)431-1441

*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA LIMITED LIABILITY CO. 4550 LIGHTHOUSE CIRCLE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing MAMPTON Help

JUN - 3 2010

https://efile.sunbiz.org/scripts/efilcovr.exe

or of		ION FOR FL		MAITTED 1	LIABILI	TY COM	VIPANY
ARTICLE I - Nas	ne:						
The name of the L		ty Company is:	•			:	
4550 LIGHTHOUSE	CIRCLE, LLC	•					
ARTICLE II - Ad	dress:					:	
The mailing addres		ddress of the pr	incipal offic	ce of the Li	mited Lia	bility Co	npany is
Principal Office A	ddress:		Mailing .	Address:	,	•	
10 CASEY LANE			10 CASEY	LANE			
MOUNT SINAI, NY	11766		MOUNT S	INAI, NY 117	66		•
ARTICLE III - R	egistered Ag	ent, Registered	Office, &	Registered	Agent's	Signatur	e:
The name and the	Florida street	address of the r	egistered aş	gent are:		, .	
		JENNIFER F	ЮТН				
Name				:			
	4550 LIGHTHOUSE CIR				÷		
		Florida street add	iress (P.O. Bo	x <u>NOT</u> accep	nable)		
	ORLANDO		FL	3280	3		
		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.

fred Agent's Signature NAIFER ROTH

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager The name and address of e	s) or Managing Member(s): ach Manager or Managing Member is as follows:				
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Me	Name and Address:				
MGR	JENNIFER ROTH				
	10 CASEY LANE				
	MOUNT SINAI, NY 11766				
MGR	BRANDON ROTH 10 CASEY LANE MOUNT SINAI, NY 11766				
	MOUNT SINAL, NY 11786				
•					
·					
(Use attachment if necessa	ry)				
NOTE: An additional ar	ticle must be added if an effective date is requested.				
REQUIRED SIGNATUR	Œ:				
	Jennifu Path				
of this	contance with section 608.408(3), Florida Smittee, the execution document constitutes on affirmation under the penalties of perjury the facts stated herein are true.)				
JENNIFER ROTH					
 	Typed or printed name of signee				

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 50.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Page 2 of 2