

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.

(((H100001998143)))



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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

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

Real Addr	ORS:			

FLORIDA LIMITED LIABILITY CO. 2791 OAKBROOK MNR, LLC

Certificate of Status	0		
Certified Copy	1		
Page Count	02		
Estimated Charge	\$155.00		

SEP 0 9 2010

EXAMINER

Electronie Filing Menu

Corporate Filing Menu

EMPIRE CORP KIT

Help

ARTICLES OF ORGANIZATION FOR 2791 OAKBROOK MNR, LLC, A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name

The name of the Limited Liability Company is:

2791 OAKBROOK MNR, LLC

ARTICLE II Address

The malling address and sheet eddress of the principal office of the Limited Liability Company is: 1301 Shotgun Road, Weston, Florida 33326. ≥ ∞.

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

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

Joel Sanders 1**301** Shotgun Road Weston, Florida 3332**6**

Etaying been named as registered agent and to accept service of process for the above stated firmed. Eablify company at the place designated in this certificate, I hereby accept the appointment as registored 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 can familiar with and accept the obligations of my position as registered agent as provided for in Circpter 608, F.S.

Joe Sanders Manager Registered Agent's Signature

ARTICLE IV
MANAGEMENT

The limited liability company is to be managed by the Manager.

logi Sanderé, Manager

(In accordance with Section 608.408(e), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

H10000199814

0696E8990E Zp:91 010Z/80/60