# L100001106318

(Requestor's Name)
(Address)
(A.I.J.,)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duringer Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800184817728

10/13/10--01006--011 \*\*1000.00

TO OCT 11 PH 4 55

B. KOHR

OCT 13 2010

**EXAMINER** 

# Advanced Incorporating, Service, Inc.

1317 California Street
 P.O. Box 20396
 Taliahassee, FL 32316

Phone: 850-222-CORP Fax: 850-575-2724

Email: orders@advancedincorporating.com Website: www.advancedincorporating.com

	•					
. / .	ME OF ENTITY	·			6	200
i	• • •	_			. '	3
/		-		· .		3
				· .:		£.
				FOR OFFICE USE ON	_Y	
PICK ONE:			•			
	CERTIFIE	ED COPY _	РНОТОС	OPY		, .
FILING:						
	DRATIONLLC	_LIMITED PARTI	NERSHIP	_GENERAL PARTNE	RSHIP	
. <u> </u>	FICTITIOUS NAME	SERVICEMARK/T	RADEMARK _	AMENDMENT		
•	FOREIC*	LIFICATION _	JUDGMENT	LIEN		
	OTHER_			••		:
RETRIEVAL:					· · ·	:
<u> </u>	_GOOD STANDING CERT/C.	U.SCERT	IFIED COPY	PHOTOCOPY		
	Of	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· ·	•	
APOSTILLE/CEI	RTIFICATION REQ	QUEST:		· .	•	
C	ountry					
and an annual section of the section	Amount of Docum	nents	us banda ruzuga halinga da kili da kili banda pera kili k	and the second of the second o	oo aa oo aa oo oo oo oo oo oo oo oo oo o	50 10 10 10 10 10 10 10 10 10 10 10 10 10
euro arrecto esculviale acculation multicitariem e	DATE		ГІМЕ			٠.
lotes:	/ · !					<del></del>

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I - Name:**

The name of the Limited Liability Company is:

# 1705 Whitehall 402, LLC, a Florida Limited Liability Company

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

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

od Boulevard, Suite 375-S			
Hollywood, Florida 33021			
Registered Agent's Signature:			

Jerald C. Cantor

Name

4000 Hollywood Blvd., Suite 375-S

Florida street address (P.O. Box NOT acceptable)

Hollywood FL 33021

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..

gistered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

# 

### **REQUIRED SIGNATURE:**

to or 90 days after the date of filing.)

Signature of a member or an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jeraid C. Cantor

Typed or printed name of 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)