

From:

To: T663\*18506176383

10/27/2010 14:51

#328 P-001-03

Division of Corporations

Page 1 of

**L10000112259**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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.

((H10000234904 3)))



H100002349043ABCX

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 : CASEY CIKLIN LUBITZ YARTENS & O'CONNOR  
Account Number : 076376001447  
Phone : (561)832-5900  
Fax Number : (561)833-4209

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 OCT 27 AM 8:53

FILED

\*\*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.  
1930 SOB, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

T. CLINE

OCT 28 2010

EXAMINER

RECEIVED

10 OCT 27 PM 2:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

From:

To: T663\*18506176383

10/27/2010 14:52

#338 P.002/003

H10000234904 3

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

1930 SOB, LLC

(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:

Principal Office Address:

223 Sunset Avenue, Suite 200  
Palm Beach, Florida 33480

Mailing Address:

223 Sunset Avenue, Suite 200  
Palm Beach, Florida 33480

FILED  
10 OCT 27 AM 8:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Richard Rampell

Name

223 Sunset Avenue, Suite 200

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

Palm Beach FL 33480

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.*

Richard Rampell

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H10000234904 3

From:

To: T663\*18506176383

10/27/2010 14:52

#338 P.003/003

H10000234904 3

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Richard Rampell 223 Sunset Avenue, Suite 200 Palm Beach, Florida 33480

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

FILED  
10 OCT 27 AM 8:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REQUIRED SIGNATURE:**

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

(In accordance with section 608.498(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

RICHARD RAMPPELL  
Typed or printed name of signor

**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)

H10000234904 3