# L11000013750

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





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SEGRETARY OF STATE DIVISION OF CORPORATION

FEB - 2 2011 EXAMINER

# **COVER LETTER**

TO:

**Registration Section** 

Division of Corporat	ions			
SUBJECT: THE BOO	THE GROUP,	LLC		
50 <b>00</b> 000	Name of Limited L	iability Compar	ıy	
The enclosed Articles of Organ		_		and the same of th
riease return an correspondence	e concerning this matter w	o the following.		
<u>WILLIAM A E</u>				
	. Nar	nc of Person		
THE BOOTH	E GROUP, LLC			
	Fir	m/Company		
9262 HERON	COVE DRIVE			
	<del></del>	Address		
WEST PALM B	EACH, FL 3341	1		
		ate and Zip Code		
	THE@COMCAST		(5	
-	ail address: (to be used for fu	•	t notification)	name and and the selection of the select
For further information concern	ing this matter, please cal	1:		
WILLIAM A BOOTHE	, JR	(561)	281-0459	
Name of Perso			& Daytime Telep	hone Number
Enclosed is a check for the f	_	1	_	1.
]\$125.00 Filing Fee	0.00 Filing Fee &	\$155.00 Filing Certified Cop (additional copy	y	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regi Divi P.O.	stration Section sion of Corporations Box 6327 ahassee, FL 32314	Registration Division of Clifton But 2661 Exec	f Corporations	rcle

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	ΓICL	E I	- N	ame
$\Delta \mathbf{n}$			- 171	am.

The name of the Limited Liability Company is:

# THE BOOTHE GROUP, 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:**

**Mailing Address:** 

9262 HERON COVE DRIVE

WEST PALM BEACH, FL 33411

9262 HERON COVE DRIVE WEST PALM BEACH, FL 33411

# 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:

Dicker, Krivok & Stoloff, P.A

Name

1818 S. Australian Avenue, Suite 400

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

West Palm Beach

<sub>FL</sub> 33409

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:

1GRM	WILLIAM A BOOTHE, JR
1GRIVI	9262 HERON COVE DRIVE
	WEST PALM BEACH, FL 33411
Use attachment if necessary)	
E V: Effective date, if other than th	ne date of filing: (OPTIC
ective date is listed, the date must lays after the date of filing.)	be specific and cannot be more than five business

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

(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. 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.)

WILLIAM A BOOTHE, JR

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)

SECRETARY OF STATE DIVISION OF CORPORATIONS