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D. BRUCE
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EXAMINER

COVER LETTER

TO:

Registration Section

Divis	sion of Corporations	
SUBJECT:	4081 BRAEMERE LLC	
sense ii	Name of Limited Liability Company	
The enclosed	Articles of Organization and fee(s) are submitted for filing.	
Please return	all correspondence concerning this matter to the following:	
	David J. DePinto, Esq.	
	Name of Person	
	DePinto Nornes & Associates, LLP	
 -	Firm/Company	
	445 Broad Hollow Road, Suite 200	_
	Address	~
	Melville, New York 11747 City/State and Zip Code	Î
	City/State and Zip Code ddepinto@dpnlaw.com	
	ddepinto@dpniaw.com	*
	E-mail address: (to be used for future annual report notification)	
For further inf	formation concerning this matter, please call:	
David J. I	DePinto, Esq. at (631) 249-8200	
	Name of Person Area Code & Daytime Telephone Number	
Enclosed is a	check for the following amount:	
\$125.00 Filing	Fee \$\bigcup \\$130.00 \text{ Filing Fee & Certificate of Status}\$\$155.00 \text{ Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}\$\$\$Certified Copy (additional copy is enclosed)	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

4081 BRAEMERE LL	C	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	ne principal office of the Limited Liability Company i	s:
Principal Office Address:	Mailing Address:	
1540 Gulf Boulevard, Unit #1406	3 Albertson Lane	
Clearwater, Florida 33767	Old Westbury, New York 11568	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own I business entity with an active Florida registration.)	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another	-
The name and the Florida street address of t	the registered agent are:	
Fakhry Youna	an Alexander	· """
	ame ASS	
1540 Gulf Boulev	· · · · · · · · · · · · · · · · · · ·	1
Florida stree	et address (P.O. Box <u>NOT</u> acceptable)	ادا
Clearwater	FL 33767	Samuel .
City	y, 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..

By: Fukling Y. Alexander

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing	Name and Address: Member
MGRM	Fakhry Younan Alexander 3 Albertson Lane Old Westbury, New York 11568
MGRM	Marcelle Matta Morcos 3 Albertson Lane Old Westbury, New York 11568
(Use attachment if nece	escary)
ARTICLE V: Effective date, if (If an effective date is listed, the to or 90 days after the date of fi	Tother than the date of filing: perpetual
Signat (In accordance constitutes an a	Faking y. Alcoandly Faking y. Alcoandly Faking y. Alcoandly Fure of a member or an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution of this documents affirmation under the penalties of perjury that the facts stated herein apprive.
I am aware that constitutes a th	t any false information submitted in a document to the Department of Trate aird degree felony as provided for in s.817.155, F.S.) Fakhry Younan Alexander
Eiling Food	Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)