

L11000045722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

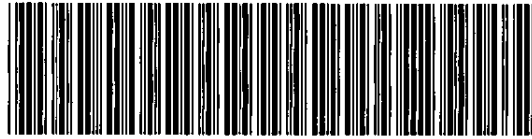
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

APR 18 2011

EXAMINER



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04/18/11--01004--005 **155.00

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FILED
11 APR 18 PM 1:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Law Offices

ALLAN M. LERNER

A Professional Association

2888 East Oakland Park Boulevard
Fort Lauderdale, Florida 33306

Telephone: (954) 563-8111
Facsimile: (954) 563-8522
E-Mail: AMLRWP@AOL.com

April 14, 2011

Via UPS Overnight Mail

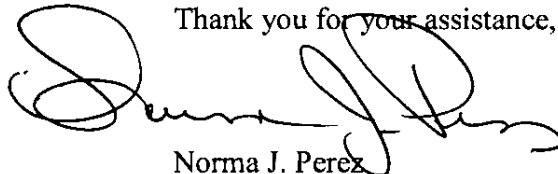
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circles
Tallahassee, FL 32301
Attention: Gina Mcleod

Re: Seminole Development, LLC

Dear Gina:

Per our conversation of April 14, 2011, I have enclosed the Articles of Organization, Designation of Registered Agent and fee(s) in the amount of \$155.00 for filing. Should require any additional information or need any assistance please contact our office.

Thank you for your assistance,



Norma J. Perez
Assistant to Allan M. Lerner

Enclosure w/ Check #7792

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Seminole Development, LLC
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:

Allan M. Lerner

Name of Person

Allan M. Lerner, P.A.

Firm/Company

2888 E. Oakland Park Blvd.

Address

Ft. Lauderdale, FL 33306

City/State and Zip Code

amlrwp@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Allan M. Lerner

Name of Person

at (954) 563-8111

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☒ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Seminole Development & Construction, 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:

c/o Seminole Tribe of Florida, Inc.
6300 Stirling Road
Hollywood, FL 33024

Mailing Address:

c/o Seminole Tribe of Florida, Inc.
6300 Stirling Road
Hollywood, FL 33024

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:

Allan M. Lerner

Name

2888 E. Oakland Park Blvd.

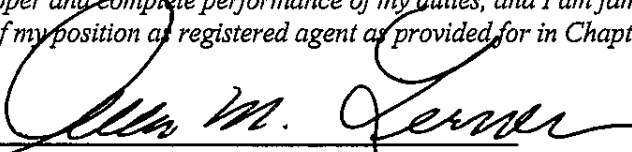
Florida street address (P.O. Box **NOT** acceptable)

Ft. Lauderdale, FL 33306

City, State, and Zip

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TALLAHASSEE, FLORIDA

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)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

James Talik

c/o Seminole Tribe of Fla. Inc.

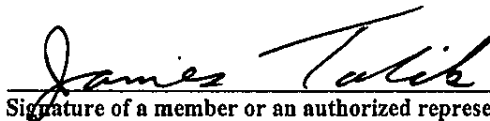
6300 Stirling Road, Hollywood, FL 33024

(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.)

REQUIRED SIGNATURE:



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.)

James Talik, Executive Administrator for Seminole Tribe of Fla., Inc. (sole member)

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)