

L11 0000 60450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

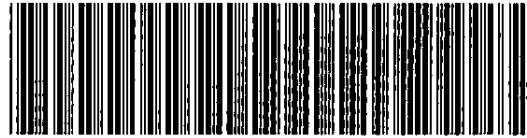
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900207641649

05/20/11--01012--003 **125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY 20 AM 8:04

FILED

J. SAULSBERRY
EXAMINER

MAY 23 2011

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 4722 Boca Raton Blvd., 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:

Kristy Hartofilis
Name of Person

Firm/Company

4722 NW Boca Raton Blvd Suite C-102
Address

Boca Raton, FL 33431
City/State and Zip Code

Khartofilis@whelchelpartners.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristy Hartofilis at (561) 939-6636
Name of Person 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

FILED
2011 MAR 20 AM 8:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

4722 Boca Raton Blvd., 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:

4722 NW Boca Raton Blvd.
Suite C-102
Boca Raton, FL 33431

Mailing Address:

4722 NW Boca Raton Blvd.
Suite C-102
Boca Raton, FL 33431

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:

Kristy Hartofilis
Name

4722 NW Boca Raton Blvd Suite C-102

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

Boca Raton, FL 33431
City, State, and Zip

FILED
2011 MAY 20 AM 8:02
CLERK OF STATE
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..

Kristy Hartofilis
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:

MGRM

Kristy Hartofilis
150 SW 16th Terr
Boca Raton, FL 33486

MGR

Nick Hartofilis
150 SW 16th Terr
Boca Raton, FL 33486

(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:

Kristy Hartofilis
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.)

Kristy Hartofilis
Typed or printed name of signer

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)

FILED
201 MAY 20 AM 8:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA