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(Requestor's Name)
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(City/Chota/Tip/Dhaga 40)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instituctions to raining Officer.
A. LUNT
MAY 24 2010
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EXAMINER

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COVER LETTER

TO:	Registration Division of C			
		•	11.0	
SUBJE	_{ст:} <u>One</u>	Eight Real Estate	, LLC ed Liability Company	<u> </u>
		Name of Limb	ed Liability Company	
The enc	losed Articles	of Organization and fee(s) are	submitted for filing.	
Please re	eturn all corres	spondence concerning this matt	ter to the following:	
,	Jesse Ei	isner		
_			Name of Person	•
-		- · · · · · · · · · · · · · · · · · · ·	Firm/Company	
	9325 NV	V 59th Lane		
_			Address	
C	Sainesville	e, FL 32653		
Ξ		<u>'</u>	y/State and Zip Code	
1	8RealEst	ate@Gmail.com		, , , , , , , , , , , , , , , , , , ,
			or future annual report notification)	
For furth	ner information	n concerning this matter, please	e call:	
Jesse	Eisner		at (352) 514-1827	
	Namo	e of Person	Area Code & Daytime Telep	phone Number
Enclose	ed is a check t	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 C	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	7.02
The name of the Limited Liability Company i	SE S
One Eight Real Estate, LLC.	ASS.
(Must end with the words "Limited Lia	bility 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:
9325 NW 59th Lane Gainesville, FL 32653	9325 NW 59th Lane Gainesville, FL 32653
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regulations entity with an active Florida registration.)	gistered Agent. You must designate an individual or another
The name and the Florida street address of the	e registered agent are:
Jesse Eisner	
Nan	ne
9325 NW 59th L	.ane
Florida street a	address (P.O. Box NOT acceptable)
Gainesville	_{FL} 32653
City,	State, and Zip
liability company at the place designated in	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Mem	بر بران المعارفة معارفة المعارفة الم
	ਹ ਾ। ਜਾ
MGR	Jesse Eisner
	9325 NW 59th Lane
	Gainesville, FL 32653
MGRM	Mary Eisner
	9325 NW 59th Lane
	Gainesville, FL 32653
/Lise attachment if necessary	
(Use attachment if necessary)
-	
LE V: Effective date, if other fective date is listed, the date	than the date of filing: (OPTIONAL e must be specific and cannot be more than five business days
LE V: Effective date, if other	than the date of filing: (OPTIONAL e must be specific and cannot be more than five business days
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LE V: Effective date, if other fective date is listed, the date days after the date of filing. REQUIRED SIGNATURE	than the date of filing: (OPTIONAL e must be specific and cannot be more than five business days
LE V: Effective date, if other fective date is listed, the date days after the date of filing. REQUIRED SIGNATURE Signature of	than the date of filing: (OPTIONAL e must be specific and cannot be more than five business days a member or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution of this document
LE V: Effective date, if other fective date is listed, the date days after the date of filing. REQUIRED SIGNATURE Signature of (In accordance with seconstitutes an affirms)	than the date of filing: (OPTIONAL e must be specific and cannot be more than five business days a member or an authorized representative of a member.

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)