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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

Division of Corpora			
SUBJECT: Davie Co	llege Suites F	artners, LLC	
	Name of Limite	ed Liability Company	
The enclosed Articles of Orga	nization and fee(s) are	submitted for filing.	
Please return all corresponden	ce concerning this matt	er to the following:	
Harvey Matte	el		
		Name of Person	
		Firm/Company	
633 S Feder	al Highway, 8t		
000 0.1 0001	arringriivay, o	Address	· •
Fort Lauderdal	e, FL 33301		
	Cit	y/State and Zip Code	
	arveymattel.com		
	·	or future annual report notification)	
For further information concer	rning this matter, please	e call:	
Harvey Mattel		at (954) 763-5095	
Name of Pers	son	Area Code & Daytime Teler	ohone Number
Enclosed is a check for the	following amount:		
\$125.00 Filing Fee \$\square \\$13 Ce	0.00 Filing Fee & ertificate 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)
Rep Div P.C	gistration Section vision of Corporations D. Box 6327 Ilahassee, 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:

The name of the Limited Liability Company is:

Davie College Suites Partners, 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:

633 S. Federal Highway, 8th Floor

Fort Lauderdale, FL 33301

P.O. Box 02-9010 Fort Lauderdale, Florida 33302-9010

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:

Harvey Mattel

Name

633 South Federal Highway, 8th Floor

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

Fort Lauderdale

_{FL} 33301

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 emplete 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:

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managin	g Member	
MGRM	Harvey Mattel	
IVIGITIVI	633 South Federal Highway, 8th Floor	
	Fort Lauderdale, FL 33301	
MGRM	Mark L. Schmidt	
	8320 West Sunrise Blvd. Suite 204	
	Plantation, Florida 33322	
	The state of the s	
(Use attachment if ne	cessary)	
•	•	
	if other than the date of filing: (OPTIONAL)	
•	the date must be specific and cannot be more than five business days prior	
to or 90 days after the date of	ming.)	
REQUIRED SIGNA	TURE:	
	ature of a member or an authorized representative of a member. see with section 608-408(3), Florida Statutes, the execution of this document in affirmation under the penalties of perjury that the facts stated herein are true.	
	7 7 2 25	
Sign	ature of a member or an authorized representative of a member.	
	ature of a member of an authorized representative of a member.	
(In accordance constitutes a	ce with section 608.408(3), Florida Statutes, the execution of this document an affirmation under the penalties of perjury that the facts stated herein are true.	
I am aware t	hat any false information submitted in a document to the Department of State	
	time degree reiony as provided for in s.517.155, 1.55.)	
<u>H</u>	arvey Matter	
	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)