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**EXAMINER** 



200209816822



CORPORATION SERVICE COMPANY

IN SERVICE COMPARY
ACCOUNT NO. : 12000000195
REFERENCE: 852041 162321A
AUTHORIZATION: Smellelenan 3
COST LIMIT : \$155.00
ORDER DATE : July 20, 2011
ORDER TIME : 1:07 PM
ORDER NO. : 852041-005
CUSTOMER NO: 162321A
DOMESTIC FILING
NAME: AGI REALTY, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight - EXT. 2956
EXAMINER'S INTTIALS:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPAN

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

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(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:
c/o Enid Hoffman	c/o Enid Hoffman
7101 Rainforest Drive	7101 Rainforest Drive
Boca Raton, FL 33434	Boca Raton, FL 33434

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:

Enio Homitan			
Name			
7101 Rainforest [	Orive		
Florida street add	iress (P.O. Box NOT acceptable)		
Boca Raton,	<sub>FL</sub> 33434		
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 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

## 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" = Managing Member MGRM Enid Hoffman 7101 Rainforest Drive Boca Raton, FL 33434 (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 of 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.)

Enid Hoffman

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)