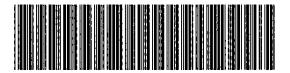
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(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

B. KOHR
JAN 1 1 2012
EXAMINER



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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

Registration Section

TO:

Division of Co	orporations		
SUBJECT: 424N	E27, LLC		,
Sobolett.		ed Liability Compa	ny R
The enclosed Articles o	f Organization and fee(s) are s	submitted for filing	
	ondence concerning this matt	_	
		_	,
Mary M.	Lamest	Name of Person	
Earnest/	Гighe Law Firm, F	P.A.	
		Firm/Company	
103 NE 4	th Street		
		Address	
Fort Laude	rdale, FL 33301		
	City	/State and Zip Code	
	E-mail address: (to be used f	or future annual repo	rt notification)
For further information	concerning this matter, please	call:	
Mary M. Earnest		054	EDE EGAA
	of Person	at (954 Area Code	525-5644 & Daytime Telephone Number
Enclosed is a check for	or the following amount:		•
\$125.00 Filing Fee	_	\$155.00 Filing Certified Cop (additional copy	y Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Con	npany is:
424NE27, LLC	
(Must end with the words "Lin	nited 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:
2609 NE 14th Avenue	2609 NE 14th Avenue
#500	#500
Wilton Manors, FL 33334	Wilton Manors, FL 33334
	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
The name and the Florida street addres	s of the registered agent are:
Grand Propertie	es, LLC
	Name

Wilton Manors FL 33334
City, State, and Zip

2609 NE 14th Avenue, #500

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..

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

Registered Agent's Signature (REOUIRED)

(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 MGRM	Grand Properties, LLC 2609 NE 14th Avenue, #500 Wilton Manors, FL 33334
(Use attachment if necessary)	
	he date of filing: (OPTION be specific and cannot be more than five business da
REOUIRED 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.)

6001 10600d

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)