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	(Re	questor's Name)	
	(Ad	dress)	
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	(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE

J. SAULSBERRY EXAMINER

FEB 13 2012

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	CT: SAK Associates, LLC Name of Limited Liability Company	
The enc	losed Articles of Organization and fee(s) are submitted for filing.	
Please n	eturn all correspondence concerning this matter to the following:	
_	Scott Kadet	
	Name of Person	
-	South Florida Savings Guy	
_	15074 Witney Road #106 30 8	
	Delray Beach, Florida 33484 AFR B	7
-	E-mail address: (to be used for future annual report polification)	. [7
For furth	her information concerning this matter, please call:	³
	Scott Kodet at (56) 865-6681 Name of Person Area Code & Daytime Telephone Number	
Enclose	ed is a check for the following amount:	
3 \$125.00	Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}	
	Mailing Address Registration Section Street/Courler Address Registration Section	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Principal Office Address:	Mailing Address:
ARTICLE II - Address: The mailing address and street addre	ess of the principal office of the Limited Liability Company is:
SAK ASSOCIATION (Must end with the words "	Limited Liability Company, "L.L.C.," or "LLC.")
The name of the Limited Liability Co	•

ARTICLE I - Name:

Principal Office Address:	Mailing Address:
15074 Witney Road #106	15074 Witney Road #106
Delray Beach, Florida 33484	Delray Beach, Florida 33484

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:	SECR	2012 FEB
Name	ETAR HASS	
15074 Witney Road #106	RY OF	5 [
Florida street address (P.O. Box NOT acceptable)		
Delray Beach FL 33484 City, State, and Zip	6H 4	

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGR	Scott Kadet 15074 Witney Delay Black, F	Road #106 Fl 33484		
		· · · · · · · · · · · · · · · · · · ·		
		SEORETARY ALLAHASSE	2012 FEB 10	TI
(Use attachment if necessary)	4	OF STATE E.FLORIDA	AM 8: 08	D
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)				or
REQUIRED SIGNATURE:	11 1/ Art			

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.)

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)