

From:

Division of Corporations

#469 P.001/003

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H12000047343 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD
Account Number : I200000000088
Phone : (800) 221-0102
Fax Number : (800) 944-6607

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Marilyn Andrew Company LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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Corporate Filing Menu

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J. BRYAN

FEB 23 2012

EXAMINER

From:

02/22/2012 14:44

#469 P.002/003

02/22/2012 09:45 FAX 5616370284

VALENCIA PALMS

001/002

((H12000047343 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Marilyn Andrew Company 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:

6892 Belmont Shore Drive
Delray Beach, FL 33446

Mailing Address:

6892 Belmont Shore Drive
Delray Beach, FL 33446

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:

Sanford Browde

Name

6892 Belmont Shore Drive

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

Delray Beach, FL 33446

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)

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02/22/2012 14:44

#469 P.003/003

02/22/2012 09:48 FAX 5618370284

VALENCIA PALMS

002/002

((H12000047343 3)))

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

Marilyn Browde

8892 Belmont Shore Drive

Delray Beach, FL 33446

MGRM

Andrew Fleisig

1009 Bendersmere Avenue

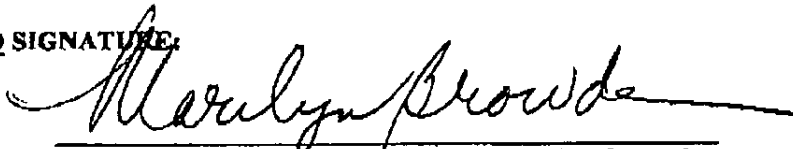
Ocean, NJ 07712

(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 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.)

Marilyn Browde

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)

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