

To: Page 17 of 20

2012-04-11 10:18:33 PDT

13234487067 From: William Morales

Division of Corporations

Page 1 of 1

503167203

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000091979 3)))



H120000919793A8C5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

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

From:

Account Name : LEGAL200M.COM INC.
Account Number : 120010000062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

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.
Polyak Land LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

FILED
12 APR 11 AM 9:18
12 APR 11 PM 4:11
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

To: Page 18 of 20

2012-04-11 10:16:33 PDT

13234487067 From: William Morales

H12000091979.3.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Polyak Land LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tiffany Russell

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

100 W. Broadway, Suite 100

(Address)

Glendale, CA 91210

(City/State and Zip Code)

For further information concerning this matter, please call:

Barbara Dang

(Name of Person)

at (

323

962-8600 ext. 7625

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$150.00 Filing Fee & Certificate 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)

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

12 APR 11 AM 9:18
FILED
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

H12000091979.3

To: Page 19 of 20

2012-04-11 10:18:33 PDT

13234467067 From: William Morales

H12000091979 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Polyak Land 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:9937 Lake Georgia Dr.
Orlando, FL 32817**Mailing Address:**9937 Lake Georgia Dr.
Orlando, FL 32817**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:

Robert J. Polyak

Name

9937 Lake Georgia Dr.Florida street address (P.O. Box **NOT** acceptable)Orlando, FL 32817

FL

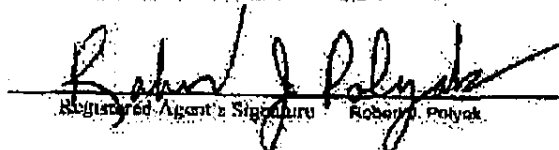
City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 APR 11 AM 9:18

FILED

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 Robert J. Polyak

(CONTINUED)

Page 1 of 2

H12000091979 3

To: Page 20 of 20

2012-04-11 10:16:33 PDT

13234467067 From: William Morales

H12000091979 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

Robert J. Polyak Trust, U/A/D-2001, as amended
9937 Lake Georgia Dr.
Orlando, FL 32817

MGRM

Barbara A. Polyak Trust, U/A/D-2001, as amended
9937 Lake Georgia Dr.
Orlando, FL 32817

(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.)

Tiffany Russell, Legalzoom.com, Inc.

Typed or printed name of signer.

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)

FILED
 12 APR 11 AM 9:18
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA