

L12000119611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

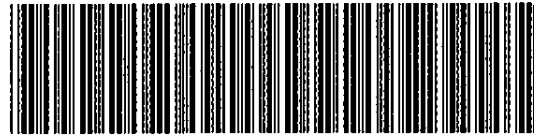
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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09/18/12--01004--016 \*\*125.00

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TALLAHASSEE, FLORIDA

12 SEP 18 AM 10:03

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DEPARTMENT OF STATE  
12 SEP 18 AM 11:39

B. BOSTICK

SEP 19 2012

EXAMINER

**CORPORATE  
ACCESS,  
INC.**

*"When you need ACCESS to the world"*

236 East 6th Avenue . Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

**WALK IN**

PICK UP: 9-18-12

- ☐ CERTIFIED COPY \_\_\_\_\_
- ☒ PHOTOCOPY \_\_\_\_\_
- ☐ CUS \_\_\_\_\_
- ☒ FILING LLC \_\_\_\_\_

1. 745 Colorado Blvd., LLC  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL INSTRUCTIONS:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

12 SEP 18 AM 10:03  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I: NAME**

The name of the Limited Liability Company is:

745 Colorado Blvd., LLC

**ARTICLE II: ADDRESS**

The mailing and street address of the principal office of the Limited Liability Company is:

6218 N. Federal Highway  
Fort Lauderdale, FL 33308

**ARTICLE III: PURPOSE**

The purpose for which this Limited Liability Company is organized is:

Any and all lawful business.

**ARTICLE IV: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE:**

Grant W. Kehres  
2000 Glades Road, Suite 302  
Boca Raton, Florida 33431

*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 property 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

FILED  
CLERK OF DISTRICT COURT  
NINTH JUDICIAL CIRCUIT  
IN AND FOR THE COUNTY OF DADE  
FLORIDA

12 SEP 18 AM 10:03

**ARTICLE V - MANAGEMENT:**

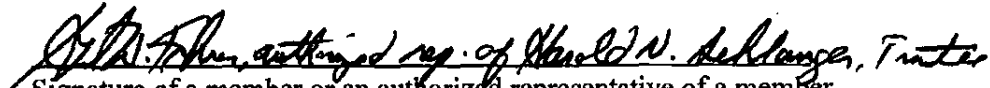
The Limited Liability Company is to be managed by a managing member and is, therefore, a member - managed company. The name and address of the managing member is:

Title: Managing Member  
Harold N. Schlanger, Trustee  
Ira J. Lang 2010 Irrevocable Trust dated January 1, 2010  
6218 N. Federal Highway  
Fort Lauderdale, FL 33308

**ARTICLE VI - EFFECTIVE DATE:**

The effective date for this Limited Liability Company shall be:

The date these Articles are filed at the office of the Florida Secretary of State.

  
Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

GRANT W. KEHRES, authorized representative of Harold N. Schlanger, Trustee  
Typed or printed name of signee.

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