

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.

(((H12000250553 3)))



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 : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305)634-3694

Fax Number

: (305)633-9696

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. CATTLEYA PROPERTIES, LLC

Certificate of Status Certified Copy 1 Page Count 04 Estimated Charge \$155.00 A. LUNT
OCT 18 2012
EXAMINER

Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

10/16/2012

EMPIRE CORP

9696889908

10/11/2022 11:32

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: CATTLEYA PROPERTIES, 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:

Fred E. Glickman, Esquire		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Name of Person	De to	
Fred E. Glickman, P.A.	MRY ASSEE	7
Firm/Company		22
9200 S. Dadeland Boulevard, Suite 50)8	₩
Address	>	-

Miami, Florida 33156

City/State and Zip Code

feglickmanpa@kwglawoffices.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Fred E. Glickman, Esquire

670-0987 x-5

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee \$130.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	A	ιR'	ΤI	\mathbf{CI}	Æ	Ι	-	N	am	e	•
------------------	---	-----	----	---------------	---	---	---	---	----	---	---

Miami, Florida 33156

The name of the Limited Liability Company is:

CATTLEYA PROPERTIES,	LLC			
(Must end with the words "Limited L	riability Company, "L.L.C.," or "LLC.")	E car	p22	
ARTICLE II - Address:			12	
The mailing address and street address of the	e principal office of the Limited Liab	ility Com	pany is	: 7
Principal Office Address:	Mailing Address:		17	
c/o Fred E. Glickman, Esquire	c/o Fred E. Glickman, Esquire		至	
9200 S. Dadeland Boulevard Suite 508	9200 S. Dadeland Boulevard S	uite 508	\$	الب

Miami, Florida 33156

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:

Fred E.	Glickman, Esquire
	Name
9200 S.	Dadeland Boulevard, Suite 508
 	Florida street address (P.O. Box NOT acceptable
Miami	_{FL} 33156
	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 norse 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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Tien Family Limited Partnership	
	c/o Fred E. Glickman, Esquire 9200 South	
	Dadeland Boulevard, Suite 508 Mlami, FL 33156	
		22
		72 2 0
	A B	=
	Ϋ́ ΑΡ (Tr _e	7
		Tre
	<u></u>	-
•	<u> </u>	≥ 5
(Use attachment if necessary)		1
•		
ICLE V: Effective date, if other than	Si C	')
ICLE V: Effective date, if other than effective date is listed, the date mus	the date of filing: (OPTIONAL	')
ICLE V: Effective date, if other than a effective date is listed, the date mus 90 days after the date of filing.) REQUIRED SIGNATURE:	the date of filing: (OPTIONAL	'
ICLE V: Effective date, if other than a effective date is listed, the date must 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a mere (In accordance with section constitutes an affirmation up I am aware that any false in constitutes a third degree fe	the date of filing: (OPTIONAL) It be specific and cannot be more than five business days	')

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)