Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H130000107183)))



H130000107163ABCV

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To:

Division of Corporations

Fax Number

: (850)617-6383

JAN 1 5 2013

L. SELLERS

From:

Account Name : JECK, HARRIS, RAYNOR & JONES, P.A.

Account Number : I20000000210 Phone : (561)713-2095 Fax Number : (561)747-4113

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

Email Address: <u>CModica@Squ.Edu</u>

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ECHETARY OF STATE

LAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO. 761 A1A, LLC

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$160.00

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15 CREMAN OF STATE

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Corporate Filing Menu

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01/13/2013 14:32 15617474113 (((H13000010718 3)))

JECK HARRIS RAYNOR &

COVER LETTER

TO

Registration Section
Division of Corporations

SUBJECT:

761 A1A, 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:

Philippe Jeck, Esquire

Name of Person

Jeck, Harris, Raynor & Jones, P.A.

Firm/Company

790 Juno Ocean Walk, Suite 600

Address

Juno Beach, FL 33408

City/State and Zip Code

cmodica@sgu.edu

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

For further information concerning this matter, please call:

Lewanna Farrell

.,561

713-2085

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 Companies

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, PL 32301

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ARTICLES OF ORGANIZATION FOR E	LORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is	
761 A1A, LLC	
(Must end with the words "Limited Link	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8965 S.E. Bridge Road, #9	8965 S.E. Bridge Road, #9
Hobe Sound, FL 33455	Hobe Sound, FL 33455
business entity with an active Florida registration.) The name and the Florida street address of the Philippe Jeck, Esquire	
Nam	e
790 Juno Ocean Walk, Suite 600	
Juno Beach, FL 33408	ddress (P.O. Box <u>NOT</u> acceptable)
	State, and Zip
liability company at the place designated in registered agent and agree to act in this capa all statutes relating to the proper and comple and accept the obligations of my position as r	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ecity. I further agree to comply with the provisions of stee performance of my duties, and I am familiar with registered agent as provided for in Chapter 608, F.S.
Registered Agent's Signi (CONTI	
Page 1 of	12 To serve
J	

days

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Charles R. Modica
· · .	8965 S.E. Artige Road, #9
	Habe Sound, FL 13455
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary) CLE V: Effective date, if other than the	
CLE V: Effective date, if other than th	at be specific and cannot be more than five busi
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Page 2 of 2

ARTICLE I -	Names	
	e Limited Liability Compa	any is:
781 A1A, LLC		
	(Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - The mailing ad		the principal office of the Limited Liability Company is:
Principal Offi	ce Address:	Mailing Address:
8965 S.E. Bridge F	Road, #9	6965 S.E. Bridge Road, #9
Hobe Sound, FL	33455	Hobe Sound, FL 33455
(The Limited Liabil		istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another
(The Limited Liabili business entity wit	ity Company cannot aerve as its ov h an active Florida registration.)	
(The Limited Liabili business entity wit	ity Company cannot serve as its over the serve as its over the serve Florida registration.) the Florida street address (m Registered Agent. You must designate an individual or another
(The Limited Liabili business entity wit	ity Company cannot serve as its over the an active Florida registration.) the Florida street address of Philippe Jeck, Esquire 790 Juno Ocean Walk, Su	on Registered Agent. You must designate an individual or another of the registered agent are: Name
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Page 1 of 2

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Titles</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Charles R. Modica
	8965 S.E. Bridge Road, #9
	Hotse Sound, FL 33455
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(Use attachment if necessary)	
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Page 2 of 2