# L13000046321

(Requestor's Name)	
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#### COVER LETTER'

TO:

Registration Section

Division of Corporations

SUBJECT:

# WESTON PROPERTY SERVICES 140, 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:

## **CARLOS PAN**

Name of Person

# ACCURATE SYSTEM TECHNOLOGY, IN

Firm/Company

## 17110 ROYAL PALM BLVD, SUITE #2

Address

# WESTON, FLORIDA, 33326

City/State and Zip Code

#### CPAN@ACCUTHINK.COM

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

For further information concerning this matter, please call:

### CARLOS PAN

, 954 , 954 3053378

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

MESTAN PROPERTY SERVICES	
WESTON PROPERTY SERVICES	e words "Limited Liability Company, "L.L.C.," or "LLC.")
(Must end with t	e words Limited Liability Company, E.E.C., of EEC.
ARTICLE II - Address:	
The mailing address and stre	t address of the principal office of the Limited Liability Conipany is:
-	
Principal Office Address:	Mailing Address:
17110 ROYAL PALM BLVD	17110 ROYAL PALM BLVD
SUITE 2	SUITE 2
WESTON, FL 33326	WESTON, FL 33326
	Agent, Registered Office, & Registered Agent's Signature: t serve as its own Registered Agent. You must designate an individual or another
(The Limited Liability Company cann- business entity with an active Florida The name and the Florida str	t serve as its own Registered Agent. You must designate an individual or another registration.)  eet address of the registered agent are:
(The Limited Liability Company cannobusiness entity with an active Florida	t serve as its own Registered Agent. You must designate an individual or another registration.)  et address of the registered agent are:
(The Limited Liability Company cann- business entity with an active Florida The name and the Florida str	t serve as its own Registered Agent. You must designate an individual or another registration.)  eet address of the registered agent are:
(The Limited Liability Company cannbusiness entity with an active Florida  The name and the Florida str  CARLOS F	t serve as its own Registered Agent. You must designate an individual or another registration.)  et address of the registered agent are:
(The Limited Liability Company cannbusiness entity with an active Florida  The name and the Florida str  CARLOS F	et serve as its own Registered Agent. You must designate an individual or another registration.)  et address of the registered agent are:  Name
(The Limited Liability Company cannbusiness entity with an active Florida  The name and the Florida str  CARLOS F  17110 ROY	et address of the registered agent are:  Name  AL PALM BLVD, SUITE 2  Florida street address (P.O. Box NOT acceptable)
(The Limited Liability Company cannbusiness entity with an active Florida  The name and the Florida str  CARLOS F  17110 ROY	et address of the registered agent are:  Name  AL PALM BLVD, SUITE 2  Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature (REQUIRED)

and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED)

Page 1 of 2

#### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR" = Manager	Name and Address:
MGRM" = Managi	ng Member
MGRM	ACCURATE SYSTEM TECHNOLOGY, INC
	17110 ROYAL PALM BLVD, SUITE 2
	WESTON, FL 33326
IV	
	•
LE V: Effective dat fective date	e, if other than the date of filing: (OPTIO
Use attachment if r LE V: Effective dat fective date is liste or 90 days after the	e, if other than the date of filing: (OPTIO
LE V: Effective dat fective dat	e, if other than the date of filing: (OPTICed, the date must be specific and cannot be more than five but e date of filing.)
LE V: Effective dat fective date is liste or 90 days after the	e, if other than the date of filing: (OPTICed, the date must be specific and cannot be more than five but e date of filing.)
LE V: Effective dat fective date is liste or 90 days after the	e, if other than the date of filing: (OPTICed, the date must be specific and cannot be more than five but e date of filing.)
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LE V: Effective date fective date is liste or 90 days after the REOUIRED SIGN  Si  (In accord	e, if other than the date of filing:  d, the date must be specific and cannot be more than five but e date of filing.)  ATURE:  gnature of a member or an authorized representative of a member.  ance with section 608.408(3), Florida Statutes, the execution of this document
LE V: Effective date fective date is listed or 90 days after the REQUIRED SIGN  Si  (In accordance to constitutes I am aware	e, if other than the date of filing:  d, the date must be specific and cannot be more than five but e date of filing.)  ATURE:  gnature of a member or an authorized representative of a member.
LE V: Effective date fective date is listed or 90 days after the REOUIRED SIGN  Si  (In accordant constitutes I am award constitutes const	e, if other than the date of filing:

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