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## **COVER LETTER**

	tion Section of Corporations		
SUBJECT: Flor	ida Live Oak,LLC Name of Lir	mited Liability Company	
The enclosed Artic	cles of Organization and fee(s) a	re submitted for filing.	
Please return all co	orrespondence concerning this m	natter to the following:	
Steph	en G. Peck	Name of Person	
<del></del>		Firm/Company	· · · · · · · · · · · · · · · · · · ·
1000	VENETIAN WAY Unit # 1304	Address	
		Addiess	
<u>Miam</u>	i, FL 33139	City/State and Zip Code	
speckmd@c	mail.com E-mail address: (to be use	d for future annual report notifica	ation)
For further inform	ation concerning this matter, ple	ase call:	
David Greenma	name of Person at (_	561 ) 400,3653 Area Code Daytime Te	lephone Number
Enclosed is a chec	k for the following amount:		
☑ \$125.00 Filing Fe	e \$\Bigcup \\$130.00 \text{ 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	Street/Courier Add Registration Section	ress

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

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:	
The name of the Limited Liability Company is:	
Florida Live Oak,LLC,	
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE 11 - Address:	
The mailing address and street address of the principal of	fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Stephen G. Peck	Stephen G. Peck
1000 VENETIAN WAY Unit # 1304	1000 VENETIAN WAY Unit # 1304
Miami, FL 33139	Miami, FL 33139
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own I another business entity with an active Florida registration	Registered Agent. You must designate an individual or 🔀
The name and the Florida street address of the registered	The state of the s
Stephen G. Peck	SSE SSE
Name	
1000 VENETIAN WAY Unit #	1304
Florida street address (P.O. Box	
Miami	FL 33139
City	Zip
Having been named as registered agent and to accept ser	vice of process for the above stated limited liability company at

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>`itle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
AMGR	Stephen G. Peck
Table Control of the	1000 VENETIAN WAY Unit # 1304
	Miami, FL 33139
AMBR	David Greenman
	6011 N. Bayshore Dr. #3
	Miami, FL 33137
(Use attachment if necessary)	
E V: Effective date, if other than the date ective date is listed, the date must be sp	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 days :
ective date is listed, the date must be sport filing.)  E VI: Other provisions, if any.  G. Peck and David Greenman are constitutes an affirmation undulated and aware that any false information.	ember or an authorized representative of a member.  205.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.  205.0203 (1) (b) The facts of perjury that the facts stated herein are true.  205.0203 (1) (b) The facts stated herein are true.  205.0203 (1) (b) The facts stated herein are true.
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