

L14000090310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

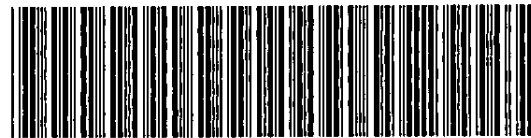
(Document Number)

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

Special Instructions to Filing Officer:

W14-34222

Office Use Only



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06/03/14--01002--006 \*\*155.00

RECEIVED  
DEPARTMENT OF STATE  
OFFICE OF COMMERCE ATTACH  
2014 JUN -2 PM 4:20  
2014 JUN -2 AM 10:19  
TO AMERICAN ROSE  
FURNITURE CO. INC. FLORIDA  
SUFFICIENCY OF FILING

JUN 05 2014

J. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE

6/2/14

TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

2014 JUN -4 AM 9:44

RECEIVED  
DIVISION OF STATE  
CORPORATIONS

June 3, 2014

CORPDIRECT

SUBJECT: ALF HOLDINGS, LLC  
Ref. Number: W14000034222

We have received your document for ALF HOLDINGS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is P00000110291.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 714A00011853

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DATE AS FILE DATE

6/2/14

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CORPORATIONS

2014 JUN -2 AM 10:19

FILED

CORP DIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-23

CONTACT: Kim Weidenbach

DATE: 06/02/14

REF. #: 9163796

CORP. NAME: ALF HOLDINGS, LLC

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

STATE FEES PREPAID WITH CHECK# 70021199 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |   |

Examiner's Initials

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TALLAHASSEE, FL  
CLERK OF CIRCUIT COURT

**ARTICLES OF ORGANIZATION  
OF  
ALF INVESTMENT HOLDINGS, LLC**

**ARTICLE I: - Name**

The name of the Limited Liability Company is: **ALF INVESTMENT HOLDINGS , LLC**

**ARTICLE II: - Address**

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

**1634 S. Kanner Highway  
Stuart, Florida 34994**

**ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature**

The name and the Florida street address of the registered agent are:

**NRAI Services, Inc.  
1200 South Pine Island Road  
Plantation, Florida 33324**

*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.*

NRAI Services, Inc., Registered Agent

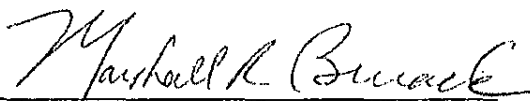
By: *Michele Holden*  
Name: Michele Holden  
Title: Assistant Secretary

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2014 JUN -2 AM 10:19  
CLERK OF DISTRICT COURT  
PALM BEACH COUNTY, FLORIDA

**ARTICLE IV: - Management**

The Limited Liability Company is to be managed by one or more Managers and is, therefore, a manager - managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization  
on June 2, 2014.

  
Marshall R. Burack, Authorized Signer

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes.)

Marshall R. Burack  
Typed or printed name of signee

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TALLAHASSEE, FLORIDA