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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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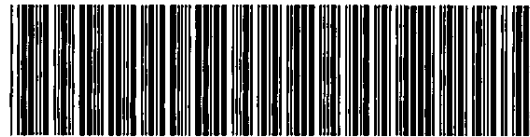
(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

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FILING
SECRETARY'S OFFICE
DIVISION OF CORPORATIONS
16 JUN -2 PM 1:42

JUN 05 2014
J. HARRIS



Smith and Condeni LLP
Attorneys at Law

Direct: (216) 574-2048
Email: subhi@smith-condeni.com

May 28, 2014

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

RE: LorArt37, LLC

Dear Sir or Madam:

Enclosed, please find one (1) original and one (1) copy of the Articles of Organization for the above referenced limited liability company and check #9959 in the amount of \$125.00 for processing fees.

Kindly process the Articles in your usual manner and return time-stamped copies of the same to the undersigned in the self addressed, stamped envelope provided.

Thank you for your assistance with this matter and please contact me if you have any questions.

Cordially,

SMITH AND CONDENI LLP



Subhi Sabeina
Paralegal

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LorArt37, 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:

Matthew Henoeh

Name of Person

Smith & Condeni, LLP

Firm/Company

600 East Granger Road, Second Floor

Address

Cleveland, OH44131

City/State and Zip Code

hberg@neo.rr.com

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

For further information concerning this matter, please call:

Matthew E. Henoeh

Name of Person

at (216) 771-1760

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:

The name of the Limited Liability Company is:

LorArt37, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

Nadine Berg, Manager
6924 West Smith Road
Medina, Ohio 44256

Nadine Berg, Manager
6924 West Smith Road
Medina, Ohio 44256

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:

Lynne M. Cross

Name

9339 Grapeview Blvd.

100 Royal Palm Way

Florida street address (P.O. Box NOT acceptable)

West Palm Beach

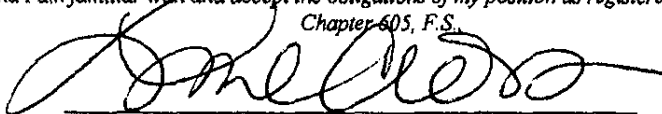
City

33412
FL 33480

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 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)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Nadine Berg

6924 West Smith Road

Medina, Ohio 44256

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Nadine M Berg

Signature of a member or an authorized representative of a member.

(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 s.817.155, F.S.)

Nadine Berg

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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