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(Re	questor's Name)	<u>.</u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
. <u> . .</u> .		

Office Use Only



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06/06/14--01006--027 **125.00





FLORIDA DEPARTMENT OF STATE Division of Corporations

June 11, 2014

ANDREW MARTIN 1300 SE 17 ST SUITE 210 FT LAUDERDALE, FL 33316

SUBJECT: RETAIL ELASING ADVISORS, LLC.

Ref. Number: W14000036198

We have received your document for RETAIL ELASING ADVISORS, LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 714A00012566

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Retail Leasing Advisors
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:
ANDREW MARTIN
Name of Person
RETAIL LEASING ADVISORS, LLC.
Firm/Company
1300 SE 17 STREET, SUITE 210
Address
FT. LAUDERDALE, FL 33316
City/State and Zip Code
OCALAMAR@GMAIL.COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ANDREW MARTIN at (954) 6498299
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

HE IAIL LEASING	ADVISORS, LLC.	. 17 12 12 C	MI I O W
	(Must end with the words "Lim	ted Liability Company, "L.L.C.,"	or "LLC.")
ARTICLE II - Add The mailing address	·	al office of the Limited Liability C	ompany is:
Principal Office Ad	ldress:	Mailing Address:	
1300 SE 17 STRE	ET	1300 SE 17 STREET	
STITE ALA		SUITE 210	· · · · · · · · · · · · · · · · · · ·
SUITE 210			
ARTICLE III - Rep The Limited Liabili mother business en	gistered Agent, Registered Offi	FT. LAUDERDALE, FL.3 ce, & Registered Agent's Signature wn Registered Agent. You must de attion.)	ıre:
ARTICLE III - Rep The Limited Liabili mother business en	gistered Agent, Registered Offi ty Company cannot serve as its of tity with an active Florida registra	FT. LAUDERDALE, FL.3 ce, & Registered Agent's Signature wn Registered Agent. You must de attion.)	ıre:
ARTICLE III - Rep The Limited Liabili mother business en	gistered Agent, Registered Officity Company cannot serve as its of tity with an active Florida registrationida street address of the register ANDREW MARTIN	FT. LAUDERDALE, FL.3 ce, & Registered Agent's Signature wn Registered Agent. You must de attion.)	ıre:
ARTICLE III - Rep The Limited Liabili mother business en	gistered Agent, Registered Officity Company cannot serve as its of tity with an active Florida registrationida street address of the register ANDREW MARTIN	FT. LAUDERDALE, FL.3 ce, & Registered Agent's Signature wn Registered Agent. You must destron.) red agent are:	esignate an individual or
ARTICLE III - Rep The Limited Liabili mother business en	gistered Agent, Registered Officty Company cannot serve as its of tity with an active Florida registratorida street address of the registed ANDREW MARTIN	FT. LAUDERDALE, FL.3 re, & Registered Agent's Signature wn Registered Agent. You must destron.) red agent are:	ıre:
ARTICLE III - Rep The Limited Liabili mother business en	gistered Agent, Registered Officity Company cannot serve as its of tity with an active Florida registratorida street address of the register ANDREW MARTIN No. 1300 SE 17 ST., SUITE 2	FT. LAUDERDALE, FL.3 re, & Registered Agent's Signature wn Registered Agent. You must destron.) red agent are:	TALLY 18
ARTICLE III - Repair The Limited Liability on the repair of the name and the Figure 1.	gistered Agent, Registered Officity Company cannot serve as its of tity with an active Florida registratorida street address of the register ANDREW MARTIN 1300 SE 17 ST., SUITE 21 Florida street address (P.O. FT. LAUDERDALE City	FT. LAUDERDALE, FL.3 ce, & Registered Agent's Signature was Registered Agent. You must destron.) red agent are: O Box NOT acceptable)	are: esignate an individual or

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	ANDREW MARTIN
	1300 SE 17 STREET, SUITE 210
	FT, LAUDERDALE, FL. 33316
(Use attachment if necessary)	
(Use attachment if necessary)	(OPTIONAL)
CLE V: Effective date, if other than the date effective date is listed, the date must be spe	of filing; (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days
CLE V: Effective date, if other than the date	of filing; (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days
CLE V: Effective date, if other than the date effective date is listed, the date must be spette of filing.) CLE VI: Other provisions, if any.	of filing:
CLE V: Effective date, if other than the date effective date is listed, the date must be spette of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	Recific and cannot be more than five business days prior to or 90 days
CLE V: Effective date, if other than the date effective date is listed, the date must be spette of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60)	ecific and cannot be more than five business days prior to or 90 days The prior of an authorized representative of a member. The prior of this document is a second of this document.
CLE V: Effective date, if other than the date effective date is listed, the date must be specified of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a menuscript of the constitutes an affirmation under I am aware that any false information.	Rember or an authorized representative of a member.

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 (Co. 1)

\$ 5.00 Certificate of Status (Optional)