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Florida Department of State

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Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na The name of the i	ime: .inited Liability Compt	my is:		
KUDISH FAMIL	Y OFFICE LLC (Must end with the	words "Limited Liability Co	ovnpany, "L.L.C.," or "LI	.C.")
ARTICLE II - A		The principal office of the i	Limited Liability Compar	ny is:
Principal Office	Address;	<u>Mailine</u>	Address:	
c/o David J. Kur 3640 Yacht Clu Aventura, FL 33	b.Dr. # 705	3640 Y	rid J. Kudish acht Club Dr. # 705 m. FL 33180	
The Limited Liab		istered Office, & Registered erve as its own Registered Studies registration,		⇔ बा Individ ual or
The name and the	Plorida street address o	of the registered agent are:		,
	David J. Kudish	Name		
	3640 Yacht Ciu Florida street ade	b Dr. # 705 dress (P.O. Box <u>NOT</u> acco	ptable)	
	Aventura	Ft. City	33180 Zip	
the place designation of the place of the compacity. I furth	enated in this cartificate, per agree to complete with	and to accept service of proc I hereby accept the appoint me yearistons of all statute accept the obligations of a Clauser 605, F.S.	unent as registered agent is relating to the proper of By position as registered t	and agree to act in this id complete performance
	Registered	(CONTINUED) Page 1 of 2	TRED)	

J. Kudish. Trustee of the David acht Club Dr. # 705 1705 07. 19. FL 33180	
e. (OPTIONAL) be more than five business days prior to	or 90 days after
e. (OPTIONAL) be more than five business days prior to	or 90 days after
e. (OPTIONAL) be more than five business days prior to	or 90 days after
e. (OPTIONAL)	or 90 days after
be more than five business days prior to	or 98 days after
prized representative of a member.	
rida Statutes, the execution of this docum perjury that the facts stated herein are true in a document to the Department of State in s.817.155, F.S.)	
name of signee	
3	a name of signee Pes: Resignation of Registered Agent

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