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	number (shown below) on the top and bottom of all pages of the document. (((H14000183752 3)))	
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: D 4: 39	To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : CORP USA	FILE 2014 AUG -4 SECRETARY OF TALLAHASSEE,
RECEIVET	Account Number : 072450003255 SOB Phone : (305)634-3694 SOB Fax Number : (786)409-5946 BOD Fax Number : (786)409-5946	D AN 9:21 FLORIDA
A 1	Email Address:	
	FLORIDA LIMITED LIABILITY CO.	
K.	SOUTHERN LAND URBAN MANAGEMENT LLC	~
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August 5, 2014

FLORIDA DEPARTMENT OF STATE Division of Corporations

CORP USA

SUBJECT: SOUTHERN LAND URBAN MANAGEMENT LLC REF: W14000047580

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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

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.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H14000183752 Letter Number: 014A00016681

RECEIVED 14 AUG -8 PM 4: 39 DIVISION OF CORPORATIONS BUREAU OF CORPORATIONS INFORMATION SERVICES

P.O BOX 6327 - Tallahassee, Florida 32314





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THE ARTICLES OF ORGANIZATION FOR SOUTHERN LAND URBAN MANAGEMENT

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME The name of the Limited Liability Company is:

SOUTHERN LAND URBAN MANAGEMENT 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

1718 NE 26TH AVE FT LAUDERDALE FL 33305

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:

Name: J. Scott Wharton Address: 11777 N.W. 27th Street City: Coral Springs State: Florida 33065

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 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)

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ARTICLE IV -

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

Title: Name & Address MGR Nicholas Obea 1718 NE 26th Ave Ft. Lauderdale Fl. 33305

ARTICLE V.

EFFECTIVE DATE, DATE OF FILING (OPTIONAL)

ARTICLE VI - OTHER PROVISIONS , IF ANY

REQUIRED SIGNATURE:

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

(In accordance with section 605.0203 (1) (b), Fiorida Statutes, the execution of this document constitutes and affirmation under the penalties of perjury that the facts stated here are true. I am aware that any false information submitted in a document to the Deportment of State constitutes a third degree felony as provided for in s.817.155.F.S.)

NICHOLAS OBEA

TYPED OR PRINTED NAME OF SIGNEE



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