

Division of Corporations

Page 1 of 1

**L14000175402**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000263093 3)))



H140002630933ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : LEGALZOOM.COM INC.  
Account Number : I20010000062  
Phone : (323) 962-8600  
Fax Number : (323) 962-3889

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 NOV 12 AM 9:31

FILED

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
SevenBiz Associates, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

ADJ

RECEIVED

14 NOV 12 AM 10:00

DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

Electronic Filing Menu

Corporate Filing Menu

Help

H14000263093 3

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SevenBiz Associates, 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:

Cheyenne Moseley

Name of Person

LegalZoom.com, Inc.

Firm/Company

100 W Broadway, Suite 100

Address

Glendale, CA 91210

City/State and Zip Code

onlinefilings@legalzoom.com

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

For further information concerning this matter, please call:

Cheyenne Moseley

Name of Person

at ( 323 )

Area Code

962-8600 ext 7625

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

01/24/2011 22:50 7869166887

JOHN CORDIA

H14000263093 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SevenBiz Associates, 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:

11252 NW 14th Court  
Pembroke Pines, FL 33026

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:

JOHN CORDIA

Name

221 NE 173 ST.

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

NORTH MIAMI BEACH

FL

33162

City

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.

JOHN CORDIA  
Registered Agent's Signature (REQUIRED)

JOHN CORDIA

(CONTINUED)

FILED  
2014 NOV 12 AM 9:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H14000263093 3

**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:**JOHN CORDIA11252 NW 14th CourtPembroke Pines, FL 33026MGRJEAN HEROLD NOEL11252 NW 14th CourtPembroke Pines, FL 33026MGRERNA LAMY11252 NW 14th CourtPembroke Pines, FL 33026MGRVALENTIN JUNIOR ANDRE11252 NW 14th CourtPembroke Pines, FL 33026

(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:**

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.)

Cheyenne Moseley, Legalzoom.com, Inc.

Typed or printed name of signer

**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)

FILED  
 2014 NOV 12 AM 9:32  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

H14000263093 3

Attachment to  
Articles of Organization for  
SevenBiz Associates, LLC

Additional managers of the Limited Liability Company are:

<u>Name of Managers</u>	<u>Address</u>
CHRISTIAN D. JEAN BAPTISTE	11252 NW 14th Court, Pembroke Pines, FL 33026
EVINE JEAN BAPTISTE BUISSERETH	11252 NW 14th Court, Pembroke Pines, FL 33026
THERAL ALEXANDRE	11252 NW 14th Court, Pembroke Pines, FL 33026

FILED  
2014 NOV 12 AM 9:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA