## 114000191092

(R	Requestor's Name)	
(A	ddress)	
(A	address)	
(Ć	city/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Nam	e)
<u>-</u> (C	Oocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	
-		

Office Use Only



500265733735

12/15/14--01006--009 \*\*310.00

KOT IN TENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

MELLY DE STATE
SERVINENT DE STAT



DEC'16 2014 D. BRUCE

## **COVER LETTER**

TO: Registration Section of Corp.		
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of O	rganization and fee(s) are submitted for filing.	
Please return all correspond	dence concerning this matter to the following:	
<del> </del>	Tina Goff - I Will puck Name of Person	iuf
<del></del>	Sunshine Corporate Firm/Company	
	3458 Lakeshore Drive	
	Tall. FL 32312	
	City/State and Zip Code	
	mail address: (to be used for future annual report notification)	
	ncerning this matter, please call:	
Name of	Person at (850) 508-1891  Area Code Daytime Telephone Number	
Enclosed is a check for the	following amount:	
□ \$125.00 Filing Fee □	\$130 00 Filing Fee & S155.00 Filing Fee & Certificate of Status (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed)	'n
Division P.O. Box	ion Section Registration Section Of Corporations Division of Corporations	A STATE OF THE STA

## AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LFT BEACH LLC		
(Must end with	the words "Limited L	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:		
	ss of the principal offi	ee of the Limited Liability Company is:
Principal Office Address:		Mailing Address:
Tincipal Office Address;		Winning Address:
74 McLean Avenue		74 McLean Avenue
		THE RESERVE TO THE PARTY OF THE
ARTICLE III - Registered Agent, The Limited Liability Company car	Registered Office, &	Yonkers, NY 10705  Registered Agent's Signature: egistered Agent. You must designate an individual or
ARTICLE III - Registered Agent, The Limited Liability Company car nother business entity with an activ	Registered Office, & not serve as its own Re Florida registration.	Yonkers, NY 10705  Registered Agent's Signature: egistered Agent. You must designate an individual or
ARTICLE III - Registered Agent, The Limited Liability Company car mother business entity with an activ The name and the Florida street add	Registered Office, & not serve as its own Re Florida registration.	Yonkers, NY 10705  Registered Agent's Signature: egistered Agent. You must designate an individual or gent are:
ARTICLE III - Registered Agent, The Limited Liability Company car mother business entity with an activ The name and the Florida street add	Registered Office, & not serve as its own Re Florida registration.	Yonkers, NY 10705  Registered Agent's Signature: egistered Agent. You must designate an individual or gent are:
nother business entity with an active the name and the Florida street add United Cor	Registered Office, & not serve as its own R re Florida registration. ress of the registered a porate Services, Inc.	Yonkers, NY 10705  Registered Agent's Signature: egistered Agent. You must designate an individual or gent are:
ARTICLE III - Registered Agent, The Limited Liability Company car mother business entity with an activ The name and the Florida street add United Cor	Registered Office, & not serve as its own R re Florida registration. ress of the registered a porate Services. Inc. Name	Yonkers, NY 10705  Registered Agent's Signature: egistered Agent. You must designate an individual or gent are:

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) Michael A. Barr, President

(CONTINUED)

Page 1 of 2

	Name and Address:
'AMBR" = Authorized Me	
'MGR" = Manager	
MGR	Robert Semaya
	374 McLean Avenue
	Yonkers, NY 10705
···-	
Use attachment if necessar	ary)
E VI: Other provisions, if a	any.
DECLURED SIGNATUR	
<u>REQUIRED</u> SIGNATUR	RE:
REQUIRED SIGNATUR	RE:
Sign	nature of a member or an authorized representative of a member.
(In accordance v	nature of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this document
Sign (In accordance w	nature of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true.
Sign (In accordance w constitutes an aff I am aware that s	nature of member or an authorized representative of a member, with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true, any false information submitted in a document to the Department of State
Sign (In accordance w constitutes an aff I am aware that s	nature of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true.
Sign (In accordance we constitutes an affiliam aware that a constitutes a thir	nature of a member or an authorized representative of a member, with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true, any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.)
Sign (In accordance we constitutes an affiliam aware that a constitutes a thir	nature of member or an authorized representative of a member, with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true, any false information submitted in a document to the Department of State
Sign (In accordance we constitutes an affiliam aware that a constitutes a thir	nature of a member or an authorized representative of a member, with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true, any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.)  Inglo J. Tuero, authorized person  Typed or printed name of signee
Sign (In accordance we constitutes an affiliam aware that a constitutes a thir	nature of a member or an authorized representative of a member, with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true, any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.)  Including J. Tuero, authorized person  Typed or printed name of signee  Filing Fees:
Sign (In accordance we constitutes an affiliam aware that a constitutes a thirm. Sel	nature of a member or an authorized representative of a member.  with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true. any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.)  Inglo J. Tuero, authorized person  Typed or printed name of signee  Filing Fees:  Articles of Organization and Designation of Registered Agent
Sign (In accordance we constitutes an affiliam aware that a constitutes a thire.  Self S125.00 Filling Fee for A \$ 30.00 Certified Copy	nature of a member or an authorized representative of a member.  with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true. any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.)  Inglo J. Tuero, authorized person  Typed or printed name of signee  Filing Fees:  Articles of Organization and Designation of Registered Agent  (Optional)
Sign (In accordance we constitutes an affiliam aware that a constitutes a thire.  Self Sign Sign Sign Sign Sign Sign Sign Sign	nature of a member or an authorized representative of a member.  with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true. any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.)  Inglo J. Tuero, authorized person  Typed or printed name of signee  Filing Fees:  Articles of Organization and Designation of Registered Agent  (Optional)

Page 2 of 2

2014 DEC 15 AH 9: 5