

LI 500 0676776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

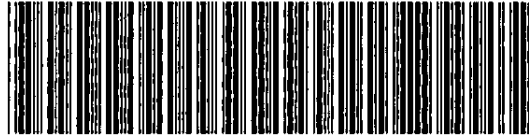
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/23/15--01013--013 **160.00

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15 FEB 23 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers FEB 27 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: North/South Thoroughbreds 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:

Christopher Pallas

Name of Person

North/South Thoroughbreds LLC

Firm/Company

1821 NE 42nd St.

Address

Ft Lauderdale, FL 33308-5516

City/State and Zip Code

cpallas976@aol.com

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

For further information concerning this matter, please call:

Chris Pallas

954

554-0759

at ()

Name of Person

Area Code

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

North/South Thoroughbreds Racing 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:

North/South Thoroughbreds LLC

Mailing Address:

same

1821 NE 42nd St

Ft. Lauderdale, FL 33308-5516

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:

CHRIS G DALLAS

Name

1821 NE 42ND Street

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

FT LAUDERDALE FL 33308

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

MGR

MGR

MGR

Name and Address:

Chris Pallas

1821 NE 42nd ST.

Ft. Lauderdale, FL 33308-5516

Bruce Hollander

10563 Boca Woods Lane

Boca Raton, FL 33428-1833

Greg Ciampa

26 Drakes Landing

Hampton, NH 03842

David Ciampa

6824 Sterling Greens Pl. #305

Naples, FL 34104

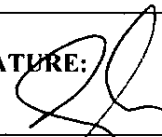
(Use attachment if necessary) *SEE ATTACHMENT*

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:

 (Chris Pallas)

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.)

Chris Pallas

Typed or printed name of signee

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)

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TALLAHASSEE FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:
Additional Authorized Member of North/South Thoroughbreds LLC

MGR

Harry J. Lund
12 School House Rd
Sandown, NH 03873