

#L15000084754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W15-32835 Mgr

Office Use Only



500271355035

05/07/15--01023--009 \*\*160.00

RECEIVED  
DEPARTMENT OF REVENUE  
15 MAY -7 PM 12:31  
SUFFICIENCY OF FILING  
10 ACKNOWLEDGE

FILED  
2015 MAY 13 AM 10:18  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
MAY 14 2015

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

PICK UP: 5-7-15

- ☒ CERTIFIED COPY \_\_\_\_\_
- ☐ PHOTOCOPY \_\_\_\_\_
- ☒ CUS FS \_\_\_\_\_
- ☒ FILING LLC \_\_\_\_\_

1. Martan Realty Holding LLC  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 8, 2015

CORPORATE ACCESS, INC.

SUBJECT: MARTAN REALTY HOLDING LLC  
Ref. Number: W15000032835

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

15 MAY 13 PM 2:42

We have received your document for MARTAN REALTY HOLDING LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 215A00009681

*Corrected*

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Martan Realty Holding 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:

HAROLD SELIGMAN

Name of Person

LONG + TUMINELLO LLP

Firm/Company

120 Fourth Ave

Address

Bay Shore N.Y. 11706

City/State and Zip Code

hseligman@msn.com

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

For further information concerning this matter, please call:

Harold Seligman

at

631

666-2500

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:

Martan Realty Holding 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:

Maria Garten

Mailing Address:

3992 Greentree Dr.  
Oceanside N.Y. 11572

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:

Corporate Access, Inc.

Name

236 E 6th Ave

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

Tallah

City

FL

32303

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.

[Signature]

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED  
2015 MAY 13 AM 10:18  
CLERK OF CIRCUIT  
JUDGE JAMES L. HARRIS  
TALLAHASSEE, FLORIDA

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

Maria Gaitan  
3992 Greentree Dr.  
Oceanside N.Y. 11572

MGR

FILED  
2018 MAY 18  
REC'D: 18  
CLERK OF CIRCUIT COURT  
IN AND FOR FLORIDA

(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:**

Maria Gaitan & Harold Seligman — attorney

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.)

MARIA GAITAN HAROLD SELIGMAN ESQ

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)