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15 MAY 15 AM 11:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 21 2015

J SHIVERS



# KRINZMAN HUSS & LUBETSKY

Attorneys at Law

800 BRICKELL AVENUE  
SUITE 1501  
MIAMI, FLORIDA 33131  
TELEPHONE 305.854.9700  
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PLEASE REPLY TO: FORT LAUDERDALE

110 SOUTHEAST 6TH STREET  
20TH FLOOR  
FORT LAUDERDALE, FL 33301  
TELEPHONE 954.761.3454  
FACSIMILE 954.761.3484

May 14, 2015

**VIA FEDERAL EXPRESS:**

Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

RE: Application by Corporation and Certificate of Limited Partnership for Florida  
Limited Liability Limited Partnership

**TO WHOM IT MAY CONCERN:**

Enclosed, please find the following documents for processing:

1. Cover Letter for Regocala L.P.
2. Certificate of Limited Partnership for Florida Limited Partnership for Regocala L.P.
3. Krinzman Huss & Lubetsky, LLP Trust Account check number 2234, in the amount of \$1,061.25 for the filing fee.
4. Cover letter for Monterey, LLC.
5. Articles of Organization for Florida Limited Liability Company.
6. Krinzman Huss & Lubetsky, LLP Trust Account check number 2233, in the amount of \$160.00 for the filing fee.

Should you have any questions or comments, please contact me at (954)761-3454.

Sincerely,



John F. Hotte

JFH/lak  
Enclosures

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Monteregy, 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:**

John F. Hotte

Name of Person

Krinzman Huss &amp; Lubetsky

Firm/Company

110 S.E. 6th Street, 20th Floor

### Address

Fort Lauderdale, Florida 33301

City/State and Zip Code

JFH@KHLLAW.COM

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

**For further information concerning this matter, please call:**

John F. Hotte                      954                      761-3454  
-----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 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:

Monteregy, 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:

110 S.E. 6th Street, 20th Floor  
Fort Lauderdale, Florida 33301

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 F. Hotte

Name

110 S.E. 6th Street, 20th Floor

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

Fort Lauderdale

Florida


33301

City

State

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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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

AMBR

**Name and Address:**

Louis Martin Boudreau

5301 Yamato Road, Suite 1240

Boca Raton, Florida 33431

(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.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**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.)

John F. Hotte

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)

*as attorney in fact.*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA