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TO: Registration Section Division of Corporations					
SUBJECT: FAHMIE LAND HOLDINGS 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:					
MATTHEW FAITHLE Name of Person					
FAHMIE LAND HOLDINGS, LLC					
3285 67th St					
Address					
VERO BEACH, 7/ 32967 City/State and Zip Code					
huss le 350 en comcast. net E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
MATTITEW FAHMIE at 772 473 - 4569 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 (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)					
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

FAHMIE LAND HOWINGS, LLC.," 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:

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:

MATTHEW FAHMLE Name

3285 6279 St Florida street address (P.O. Box NOT acceptable) VERO Beach, FL 32

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)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager AMBR	MATTHEW FAHMIE VERDBEACH, FL 32967			
				
MANAGEM AND STREET				
(Use attachment if necessary)				
the date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of States.	ng: (OPTIONAL) and cannot be more than five business days prior to or 90 days after ne applicable statutory filing requirements, this date will not be listed as te'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.)				
MATTHEN	FAHMIE sed or printed name of signee			
\$125.00 Filing Fee for Articles of Organiza \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	Filing Fees: ation and Designation of Registered Agent			

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

ARTICLE IV-

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