L 60000001486

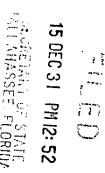
(Red	questor's Name)	
(Add	Iress)	
(Add	dress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



700280201817

700280201817 12/31/15--01022--012 **130.00



M 1/12

COVER LETTER

то:	Registration Section Division of Corporations	
SUBJE	Lifestyle Construction Group LLC	
SUBJE	Name of Limited Liability Company	
The enc	losed Articles of Organization and fee(s) are submitted for filing.	
Please r	eturn all correspondence concerning this matter to the following:	
	James Dougherty	
	Name of Person	
	Lifestyle Construction Group LLC	
	Firm/Company	
	1518 SW 24th Street	
	Address	
	Fort Lauderdale, Florida 33315	
	City/State and Zip Code Jamespd85@gmail.com	
	E-mail address: (to be used for future annual report notification)	
For furthe	er information concerning this matter, please call:	
	James Dougherty 954 789-7746	
	Name of Person Area Code Daytime Telephone Nur	mber
Enclose	d is a check for the following amount:	
\$125.00	Certificate of Status — Certified Copy (additional copy is enclosed)	160.00 Filing Fee, Certificate of Status & Certified Copy ditional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Cir Tallahassee, FL 32301	cle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:				15 DEC
Lifestyle Construction	Group LLC			表示	ယ်
(Must end wi	ith the words "Limited	Liability Co	mpany, "L.L.C.," or "LLC.")	- Milli	احتميد
(Alasi etta Al				1 T) C.	PH 12:
ARTICLE II - Address:				ین تے	~
The mailing address and street add	lress of the principal of	fice of the L	imited Liability Company is:	유팅	cn
<u>Principal</u>	Office Address:		Mailing Address:	\$7	52
1518 SW 24 STREET			1518 SW 24 STREET		
FORT LAUDERDAL	E, FL 33315		FORT LAUDERDALE, FL 33315		
					
ARTICLE III - Registered Agen (The Limited Liability Company c another business entity with an ac The name and the Florida street ad	annot serve as its own l tive Florida registration	Registered A	gent. You must designate an individua	il or	
		Name			
	1518 sw 24 street				
	Florida street address	(P.O. Box	NOT acceptable)		
	fort lauderdale	ก	33315		
	City	State	Zip		
place designated in this certificate, I further agree to comply with the pro	hereby accept the appo visions of all statutes rea	iniment as re lating to the is registered red Agent	for the above stated limited liability conegistered agent and agree to act in this proper and complete performance of magent as provided for in Chapter 605, I	capacity. y duties, a	I
		(CONTIN	ՍԵՍ)		

Page 1 of 2

Title:			Name and Address:	in the second se	5
	Authorized Member	er			30
"MGR" = N	1anager			I	5
<u>MGR</u>			James Dougherty	<u> </u>	ယ
			1518 sw 24 street	<u> </u>	
			fort lauderdale, FL 33315	<u> </u>	PH
				<u> </u>	
	<u>.</u>				ΐ
			1.01.112.1.030.12.030.12		Ç
				<u> </u>	1/2
					
LE V: Effect ffective date i e of filing.)	s listed, the date m	ust be specific at	g: 1/4/2016 ad cannot be more than five busin applicable statutory filing requirer	ess days prior to or 90	·
LEV: Effect ffective date i e of filing.) If the date ins nument's effect	ive date, if other tha s listed, the date m	ust be specific at	nd cannot be more than five busin applicable statutory filing requirer	ess days prior to or 90	·
LEV: Effect ffective date i e of filing.) If the date ins nument's effect	ive date, if other that is listed, the date merted in this block of tive date on the De	ust be specific at	nd cannot be more than five busin applicable statutory filing requirer	ess days prior to or 90	·
LE V: Effect ffective date i e of filing.) If the date ins nument's effect LE VI: Other	ive date, if other that is listed, the date merted in this block of tive date on the De	ust be specific at	nd cannot be more than five busin applicable statutory filing requirer	ess days prior to or 90	·
LE V: Effect ffective date i e of filing.) If the date ins nument's effect LE VI: Other	ive date, if other that is listed, the date merted in this block of tive date on the Deprovisions, if any. D SIGNATURE:	ust be specific and loes not meet the partment of State	applicable statutory filing requirer 's records.	ess days prior to or 90	·
LE V: Effect ffective date i e of filing.) If the date ins nument's effect LE VI: Other	ive date, if other that is listed, the date merted in this block tive date on the Deprovisions, if any. D SIGNATURE:	loes not meet the partment of State	applicable statutory filing requirer 's records.	ess days prior to or 90 ments, this date will no	at be li
LE V: Effect ffective date i e of filing.) If the date ins nument's effect LE VI: Other	ive date, if other that is listed, the date merted in this block of tive date on the Deprovisions, if any. D SIGNATURE: Signature This documen	loes not meet the partment of State	applicable statutory filing requirer 's records.	ess days prior to or 90 ments, this date will no ments, this date will no famember. (a member.) (b), Florida Statutes.	ot be li
LE V: Effect ffective date i e of filing.) If the date ins nument's effect LE VI: Other	erted in this block of tive date on the Deprovisions, if any. D SIGNATURE: Signature This documen I am aware tha	loes not meet the partment of State	applicable statutory filing requirer 's records.	ess days prior to or 90 ments, this date will no ments, this date will no famember. (a member.) (b), Florida Statutes.	ot be li
LE V: Effect ffective date i e of filing.) If the date ins ument's effect LE VI: Other	erted in this block of tive date on the De provisions, if any. D SIGNATURE: Signature This documen I am aware tha constitutes a the silested.	loes not meet the partment of State re of a member of sexecuted in act any false informit degree felony Dougherty	applicable statutory filing requirer 's records. The above that the busing applicable statutory filing requirer is records. The above that the busing applicable statutory filing requirer is recorded as a second of the business of the bu	ess days prior to or 90 ments, this date will no ments, this date will no famember. (a member.) (b), Florida Statutes.	ot be li
LE V: Effect ffective date i e of filing.) If the date ins nument's effect LE VI: Other	erted in this block of tive date on the De provisions, if any. D SIGNATURE: Signature This documen I am aware tha constitutes a the silested.	loes not meet the partment of State re of a member of sexecuted in act any false informit degree felony Dougherty	applicable statutory filing requirer 's records. Tanauthorized representative of coordance with section 605.0203 (1 ation submitted in a document to the	ess days prior to or 90 ments, this date will no ments, this date will no famember. (a member.) (b), Florida Statutes.	ot be li
LE V: Effect ffective date i e of filing.) If the date ins nument's effect LE VI: Other	erted in this block of tive date on the De provisions, if any. D SIGNATURE: Signature This documen I am aware tha constitutes a the silested.	loes not meet the partment of State re of a member of sexecuted in act any false informit degree felony Dougherty	applicable statutory filing requirer 's records. The above that the busing applicable statutory filing requirer is records. The above that the busing applicable statutory filing requirer is recorded as a second of the business of the bu	ess days prior to or 90 ments, this date will no ments, this date will no famember. (a member.) (b), Florida Statutes.	ot be li