4/600060959

(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(C)	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	ne)
(De	ocument Number)	
Certified Copies	Certificates	of Status
Certified Copies	Certificates	o or Status
Special Instructions to	Filing Officer:	
!		

Office Use Only



100283334401

03/22/16--01025--018 **160.00

EFFECTIVE DATE

16 MAR 22 PM 2: 14

MAR 2 2016

S. GILBERT

COVER LETTER

	Registration Section Division of Corporations			
SUBJEC	8245 93rd Lane South, LLC			
SUBJEC		Limited Liabili	ty Company	
The enclo	osed Articles of Organization and fee(s) are submitted	for filing.	
	urn all correspondence concerning this		•	
	Jennifer L. Strickland, Paralegal		J	
	, 0	Name of	Person	.
	Mark A. Perry, PA			
		Firm/Co	mpany	
	88 NE 5th Avenue			
		Addre	ess	
	Delray Beach, FL 33483			
		City/State and	l Zip Code	
	admin@bigorangelandscaping.com			
	E-mail address: (to be u	sed for future a	nnual report notificati	ion)
For further	information concerning this matter, ple	ease call:		
	Jennifer L. Strickland	561 (276-4146	
	Name of Person	Area Code	Daytime Telephon	e Number
Enclosed	is a check for the following amount:			
\$125.00 F	Filing Fee \$130.00 Filing Fee & Certificate of Status	L´—Certific	O Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address	•
	New Filing Section		New Filing Section	
	Division of Companyions		District and COsmonwall	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

, ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			- 1	I m
The name of the Limited Liabil	ity Company is:			
			16 MAR 22	DM 0
8245 93rd Lane Sou	th, LLC		, , , , , , , , , , , , , , , , , , ,	in 2: [4
(Must end	with the words "Limited	l Liability Company,	"L.L.C.," or "LLC.")	T SIAIE Propina
ARTICLE II - Address:			_	. COM
The mailing address and street a	address of the principal o	office of the Limited I	Liability Company is:	
<u>Princi</u> j	oal Office Address:		Mailing Address:	
8245 93rd Lane Sou	th	8201	96th Court	
Boynton Beach, FL			ton Beach, FL 33472-4405	
				_
(The Limited Liability Company another business entity with an The name and the Florida street	active Florida registration	on.)	ou must designate an individual or	
	Mark A. Perry, Esq.			
	00 377 5.1 4	Name		
	88 NE 5th Aver	nue		
	Florida street addres	s (P.O. Box NOT ac	ceptable)	
	Delray Beach	Florida	33483	
	City	State	Zip	
place designated in this certificate further agree to comply with the p	e, I hereby accept the apport provisions of all statutes re bligations of my position	ointment as registered elating to the proper of	above stated limited liability company d agent and agree to act in this capacity and complete performance of my duties a provided for in Chapter 605, F.S	ty. I
		Page 1 of 2		

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	1 00 O O W
MGR	JeffreyS. Galit
	8201 96th Court South
	Boynton Beach, FL 33472-4405
(Use attachment if necessary)	
ective date is listed, the date must be s of filing.)	tte of filing: May 1, 2016 (OPTIONAL) specific and cannot be more than five business days prior to or 90
ective date is listed, the date must be s of filing.)	specific and cannot be more than five business days prior to or 90 t meet the applicable statutory filing requirements, this date will no
ective date is listed, the date must be sof filing.) the date inserted in this block does not	specific and cannot be more than five business days prior to or 90 t meet the applicable statutory filing requirements, this date will no
ective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department. E VI: Other provisions, if any. REOUIRED SIGNATURE. Signature of a rather document is executed.	t meet the applicable statutory filing requirements, this date will no not of State's records. The state of an authorized representative of a member. State in accordance with section 605.0203 (1) (b), Florida Statutes.
ective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE Signature dia r This document is exect am aware that any fall	t meet the applicable statutory filing requirements, this date will no not of State's records. The meet the applicable statutory filing requirements, this date will no not of State's records. The member or an authorized representative of a member. Extended in accordance with section 605.0203 (1) (b), Florida Statutes. Itse information submitted in a document to the Department of State
ective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE Signature dia r This document is exect am aware that any fall	t meet the applicable statutory filing requirements, this date will no not of State's records. The state of an authorized representative of a member. State in accordance with section 605.0203 (1) (b), Florida Statutes.
rective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any. REOUIRED SIGNATURE Signature of a rather than a sure that any fall constitutes a third degree.	t meet the applicable statutory filing requirements, this date will no not of State's records. The meet the applicable statutory filing requirements, this date will no not of State's records. The meet the applicable statutory filing requirements, this date will no not of State's records. The meet the applicable statutory filing requirements, this date will no not of State's records. The meet the applicable statutory filing requirements, this date will no not of State's records.
ective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE Signature dia r This document is exect am aware that any fall	t meet the applicable statutory filing requirements, this date will no not of State's records. The meet the applicable statutory filing requirements, this date will no not of State's records. The member or an authorized representative of a member. Extended in accordance with section 605.0203 (1) (b), Florida Statutes. Itse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.
rective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department of the EVI: Other provisions, if any. REOUIRED SIGNATURE Signature of a range of the This document is exect a may aware that any fall constitutes a third degree.	t meet the applicable statutory filing requirements, this date will no not of State's records. The meet the applicable statutory filing requirements, this date will no not of State's records. The meet the applicable statutory filing requirements, this date will no not of State's records. The meet the applicable statutory filing requirements, this date will no not of State's records. The meet the applicable statutory filing requirements, this date will no not of State's records.
rective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department of the EVI: Other provisions, if any. REOUIRED SIGNATURE Signature of a range of the This document is exect a may aware that any fall constitutes a third degree.	t meet the applicable statutory filing requirements, this date will no not of State's records. Typed or printed name of signee
rective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department. E VI: Other provisions, if any. REQUIRED SIGNATURE Signature of a recommend of the department of the second of the department of the second of	t meet the applicable statutory filing requirements, this date will no not of State's records. Typed or printed name of signee Filing Fees:
rective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department of the EVI: Other provisions, if any. REQUIRED SIGNATURE Signature of a recommend of the Department of the EVI: Other provisions, if any. Signature of a recommend of the Department of the EVI: Other provisions, if any. Signature of a recommend of the Department of the EVI: Other provisions, if any.	t meet the applicable statutory filing requirements, this date will no not of State's records. Thember or an authorized representative of a member. State in accordance with section 605.0203 (1) (b), Florida Statutes. Itse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent
rective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department. E VI: Other provisions, if any. REQUIRED SIGNATURE Signature of a recommend of the department of the second of the department of the second of	meet the applicable statutory filing requirements, this date will no not of State's records. Typed or printed name of signee Filing Fees: Drganization and Designation of Registered Agent