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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: THE CAMPAIN TO ELECT Robert SIZBER FOR Name of Limited Liability Company PRESIDENT LLC
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Robert SILRER Name of Person
THE compain to Elect Robert SILBER FOR Firm/Company president LLC
150 N.E. 150.4h ST.
City/State and Zip Code  No E MC1 A DDX & S  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert SILBER at (305) 947 4584  Name of Person Area Code Daytime Telephone Number  MORNING UNTIL 11:00 please
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  Street Address  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

THE CAMPAIN TO BLECT Robert SIZBER FOR PRESIDENT
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

LC

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
Robert SILBER	Robert SILBER
150 N.E. 150 th St	150 N. F. 150 +V ST
N. MIAMI FG 33/61	N. MINM 1 FL 3316

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:

Robert Silber

Name

150 ME. 1504 St

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

Name

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 (REQUIREI

(CONTINUED)

Page 1 of 2

16 JUN -6 PH D: In

Fitle:  'AMBR" = Authorized Member  'MGR" = Manager	Name and Address:
"MBR"	Robert SILBER 150 N.E. 150 H-24 W. MINAM FL 33161
-	
ctive date is listed, the date must be f filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 da at meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the detive date is listed, the date must be filing.)	specific and cannot be more than five business days prior to or 90 days trace the applicable statutory filing requirements, this date will not be not of State's records.
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