2017-03-10 13:59:47 CST

19542080845 From Ranae McGraw

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170000677063)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 Phone Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Address:

FLORIDA LIMITED LIABILITY CO.

Buckingham Realty Advisors LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

TO:	New Filing Division of	Section Corporations	
SUBJE		gham Realty Advisors LLC	:
CODYE	·····	Name of i	Limited Liability Company
The enc	lused Article	s of Organization and fcc(s)) are submitted for filing.
Pleaser	mos lla muta	espondence concerning this	matter to the following:
	Richard	Simone	
			Name of Person
	Bucking	ham Realty Advisors LLC	
			Firm/Company
	1600 Gu	lf Blvd, # 711	
			Address
	Clearwa	ter FL 33767	
	richsimor	reos,liung@o	City/State and Zip Code
			sed for future annual report notification)
For furth	er informatio	n concerning this matter, ple	rase call:
	Richard l	Simone at	917 346-5518
	1	Name of Person	Area Code Daytime Telephone Number
Enclose	od is a chock t	for the following amount:	
]\$125.0	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	
	Ni Di P.	eiling Address w Filing Section vision of Corporations O. Box 6327 Illahassee, FL 32314	Street Address Now Filing Section Division of Corporations Clitton Building 2661 Executive Center Circle Tullahasseo, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:			
Buckingham Realty A (Must conta	dvisors LLC in the words "Llunited"	Liability Company	y, "LLC.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	dress of the principal o	ffice of the Limit	ed Liability Company is:	
	Office Address:		Mailing Address:	
1600 Gult	Blvd # 7/1 FL 3376	16	00 Gulf Blvd, #711 Clearwarer FL 767	
Claurwater.	FL 3376	2	707	
another business entity with an au The name and the Florida street a	_	•		
		Cattle		
	1600 Gulf Blvd, # 71			
	Florida street address	S (P.O. BOX BUI	acceptable)	
	Clearwater	Florida	33767	
	City	State	Zip	
place designated in this certificate, t further agree to comply with the pro	hereby accept the appointsions of all statutes re	ointment as rugisti elating to the prop	he above stated limited liability comp tred agent and agree to act in this cap ar and complete performance of my d t us provided for in Chapter 603, F.S.	pacity. [hutles, and [
	Richard Si	naobe 🛴	11.1.1.0	
В		7	elle Church	
	Regist	ered Agent's Sign	sture (REQUIRED)	

(CONTINUED)

CORETARY OF STATE

Title	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Paka Waldinin Ina
AMBR	Soho Holdings, Inc. 1600 Oulf Blvd, #711 Clearwater FL 33757
	1000 0001 21100 11 777 01001 1100 1 1 2 77757
MOR	Richard Simone
	1600 Gulf Blwd, #711 Clearwater FL 33767
	p
(I ke attrobrent if necessary)	
ective date is listed, the date must b of filing.)	date of filing: e specific and cannot be more than five business days prior to or 9 not meet the socilicable statistory filing requirements, this date will no
EV: Effective date, if other than the settive date is listed, the date must be of filler.)	e specific and cannot be more than five business days prior to or 9 not most the applicable statutory filing requirements, this date will no
EV: Effective date, if other than the settive date is listed, the date must be of filling.) The date inserted in this block does ment's effective date on the Department's effective date on the Department.	e specific and cannot be more than five business days prior to or 9 not most the applicable statutory filing requirements, this date will no
E V: Effective date, if other than the settive date is listed, the date must but filling.) The date inserted in this block does ment's effective date on the Department's effective date on the Department's	e specific and cannot be more than five business days prior to or 9 not meet the applicable statistory filing requirements, this date will not sent of State's records.
E V: Effective date, if other than the settive date is listed, the date must but filling.) The date inserted in this block does ment's effective date on the Departm. E VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 9 not most the applicable statutory filing requirements, this date will no
E V: Effective date, if other than the settive date is listed, the date must but filling.) The date inserted in this block does ment's effective date on the Department's effective date on the Department's Other provisions, if any. REQUIRED SIGNATURE:	e specific and cannot be more than five business days prior to or 9 not meet the applicable statutory filing requirements, this date will not ment of State's records. Authorized a member or an authorized representative of a member.
E V: Effective date, if other than the serive date is listed, the date must but filling.) the date inserted in this block does ment's effective date on the Departm E VI: Other provisions, if any. RECUIRED SIGNATURE: Signature of This document is to	e specific and cannot be more than five business days prior to or 9 not most the applicable statistory filing requirements, this date will not next of State's records. Compared to the applicable statistory filing requirements, this date will not sent of State's records. Compared to the applicable statistory filing requirements, this date will not sent of State's records.
E V: Effective date, if other than the serive date is listed, the date must but filling.) The date inserted in this block does ment's effective date on the Departm E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is end aware that any	not meet the applicable statutory filing requirements, this date will not meet the applicable statutory filing requirements, this date will not ment of State's records.
E V: Effective date, if other than the serive date is listed, the date must but filling.) The date inserted in this block does ment's effective date on the Departm. E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is an aware that any	e specific and cannot be more than five business days prior to or 9 not most the applicable statistory filing requirements, this date will not next of State's records. Compared to the applicable statistory filing requirements, this date will not sent of State's records. Compared to the applicable statistory filing requirements, this date will not sent of State's records.
E V: Effective date, if other than the serive date is listed, the date must but filling.) The date inserted in this block does ment's effective date on the Departm. E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is an aware that any	not meet the applicable statutory filing requirements, this date will not meet the applicable statutory filing requirements, this date will not ment of State's records. Compared to the applicable statutory filing requirements, this date will not ment of State's records. Compared to the applicable statutory filing requirements, this date will not ment of State appropriate of a member or an authorized representative of a member. Recuted in accordance with section 605.0203 (1) (b), Florida Statutes false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.8.
E V: Effective date, if other than the serive date is listed, the date must but filling.) The date inserted in this block does ment's effective date on the Departm E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is end aware that any	not meet the applicable statutory filing requirements, this date will not meet the applicable statutory filing requirements, this date will not ment of State's records.
E V: Effective date, if other than the setive date is listed, the date must be if filing.) the date inserted in this block does ment's effective date on the Department's effective date on the Department's effective date on the Department's Grant Course of This document is earlier of the date in t	not meet the applicable statutory filing requirements, this date will not meet the applicable statutory filing requirements, this date will not ment of State's records. Compared to the applicable statutory filing requirements, this date will not ment of State's records. Compared to the applicable statutory filing requirements, this date will not ment of State appropriate of a member or an authorized representative of a member. Recuted in accordance with section 605.0203 (1) (b), Florida Statutes false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.8.