

L17000106411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

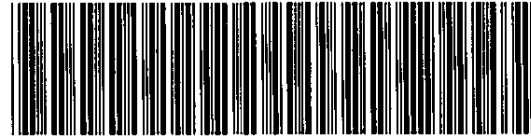
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/25/17--01002--016 \*\*130.00

SEC. 5000 (b) (1) (A)  
17 MAY 12 PM 5:09

M. MOON

APR 24 2017

17 355/3



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 25, 2017

KENESHA BLAKE  
6800 LANDINGS DRIVE, APT. 208E  
LAUDERHILL, FL 33319

SUBJECT: BREAKENRIDGELEE LLC.  
Ref. Number: W17000035563

RECEIVED  
SECRETARY OF  
STATE  
17 MAY 12 PM 3:08

We have received your document for BREAKENRIDGELEE LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Matthew T Moon  
Regulatory Specialist II

Letter Number: 317A00008014

RECEIVED  
17 MAY 12 PM 4:17  
SPECIAL  
INFORMATION SERVICES

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BREAKENRIDGELEE LLC.

(Must contain the words "Limited Liability Company, "L.L.C.," 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:

6800 Landings Drive Apt 208  
Lauderhill FL  
33319

6800 LANDINGS DRIVE  
APARTMENT 208E  
LAUDERHILL FL 33319

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:

KENESHA BLAKE

Name

6800 LANDINGS DRIVE, APARTMENT 208E

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

LAUDEHILL

FLORIDA

33319

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..*

K. Blake

Registered Agent's Signature (REQUIRED)

(CONTINUED)

17 MAY 12 PM 5:09  
JUL 11 11:45 AM '12

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

KENESHA BLAKE

6800 LANDINGS DRIVE, APARTMENT 208E

LAUDERHILL, FLORIDA 33319

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

KENESHA BLAKE

Typed or printed name of signee

**Filing Fees:**

**\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**

17 MAY 12 PM 5:09

SEC. 605.0203 (1) (b)