

Division of Corporations

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U7000292953

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : LAW OFFICE OF GERALD K. SCHWARTZ, P.A.
Account Number : I20080000083
Phone : (305) 673-1101
Fax Number : (305) 673-5505

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

Email Address: annie@belofflaw.com

17 NOV -7 AM 11:38

CONTACT INFORMATION SERVICES

FLORIDA LIMITED LIABILITY CO. ALICE'S PLAYGROUND LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

17 NOV -7 AM 11:38

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850-617-6381

11/7/2017 10:23:15 AM PAGE 1/001 Fax Server



November 7, 2017

FLORIDA DEPARTMENT OF STATE

LAW OFFICE OF GERALD K SCHWARTZ

Division of Corporations

SUBJECT: ALICE'S PLAYGROUND LLC
REF: W17000089085

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

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.

Neysa Culligan
Regulatory Specialist II

FAX Aud. #: H17000292953
Letter Number: 617A00022479

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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"

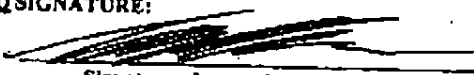
Name and Address:

MARC KREAMER
 2006 NW 2ND AVENUE
 DELRAY BEACH, FLORIDA 33444

(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, P.S.

MARC KREAMER

Typed or printed name of signer

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)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ALICE'S PLAYGROUND 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:2006 NW 2ND AVENUE
DELRAY BEACH, FLORIDA 33444Mailing Address:2006 NW 2ND AVENUE
DELRAY BEACH, FLORIDA 33444

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:

MARC KREAMER

Name

2006 NW 2ND AVENUEFlorida street address (P.O. Box NOT acceptable)

<u>DELRAY BEACH</u>	<u>FLORIDA</u>	<u>33444</u>
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 (REQUIRED)

(CONTINUED)

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Send Result Report

MFP

CS 7002i

Firmware Version 2NJ_2000.001.626 2017.05.10

VJX7500274
11/06/2017 17:54
[2NJ_1000.001.110] [2NH_1100.001.002] [2ND_7000.002.323]

Job No.: 014498

Total Time: 0'00'25"

Page: 003

Complete

Document: doc20171106175354

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 Fax Number : (850) 621-6281

From: Account Name : LAW OFFICE OF GERALD K. SCHMIDT, P.A.
 Account Number : 1X0200070001
 Phone : (305) 873-1101
 Fax Number : (305) 873-2605

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

Email Address: monika.belloff.law.com

FLORIDA LIMITED LIABILITY CO.
ALICE'S PLAYGROUND LLC

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Electronic Filing Menu

Corporate Filing Menu

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11/6/2017

No.	Date/Time	Destination	Times	Type	Result	Resolution/ECH
001	11/06/17 17:54	18506178381	0'00'25"	FAX	OK	200x100 Normal/On