Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name : SIEGFRIED, KIPNIS, RIVERA, LERNER, DE LA TORRE & MOCARSKI PA

Account Number : 076424000767 Phone

: (305)442-3334

Fax Number

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FLORIDA LIMITED LIABILITY CO. LAKE CLUB PARTNERS, LLC

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Corporate Filing Menu

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COVER LETTER

Registration Department TO: **Division of Corporations**

LAKE CLUB PARTNERS, LLC SUBJECT: _ Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Oscar R. Rivera, Esq. Siegfried, Rivera, Hyman, Lerner, De La Torre, Mars & Sobel, P.A. 8211 West Broward Boulevard, Suite 250 Plantation, Florida 33324 orivera@srhl-law.com

For further information concerning this matter, please call:

Oscar R. Rivera, Esq. Telephone: 954-781-1134

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ARTICLE I - NAME:

The name of the Limited Liability Company is: LAKE CLUB PARTNERS, LLC

ARTICLE II - ADDRESS:

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

<u>Principal Office Address:</u>
3 Grove Isle Drive, Suite 1601
Miami, Florida 33133

Mailing Address: 3 Grove Isle Drive, Suite 1601 Miami, Florida 33133

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The Name and the Florida Street address of the Registered Agent is SKRLD INC., 8211 West Broward Boulevard, Suite 250, Plantation, Florida 33324.

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.

SKRLD INC.

Oscar R. Rivera

Florida Bar No.: 329193

ARTICLE IV - MANAGER/DIRECTORS

Title: MGR Name and Address

Ernesto De La Fe 3 Grove Isle Drive, Suite 1601 Miami, Florida 33133 [H18000011608 3]

REQUIRED SIGNATURE:	
Signature of a member or authorized corresentative of a member of a member of authorized corresentative of a member of authorized corresponding to this document continuous of perjury that the facts stated herein are true. I am aware that any false information the Department of State constitutes a third degree felony as provided for in successing suppose.	nstitutes an affirmation under on submitted in a document to
OSCAR R. RIVERA ESQ.	1
Type or printed name of signee	