# Florida Department of State Invited International State International In

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : BELOFF LAW, P.A.
Account Number : I20080000060
Phone : (305)673-1101
Fax Number : (305)673-5505

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Email Address:

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### FLORIDA LIMITED LIABILITY CO. 1962 WEST TENN, LLC

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Estimated Charge	\$160.00

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SECRETARY OF STATE

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#### **COVER LETTER**

TO:

**REGISTRATION SECTION** 

DIVISION OF CORPORATION

SUBJECT:

**NEW FILING** 

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

Please return all correspondence concerning this matter to the following:

Jonathan D. Beloff, Esq. 1691 Michigan Avenue Suite 250 Miami Beach, Florida 33139 Telephone: 305-673-1101

Email Address:

sherry@belofflaw.com

\$160.00 Filing Fee Certificate Status & Certified Copy (((H18000213484 3)))

## ARTICLES OF ORGANIZATION FOR 1962 WEST TENN, LLC a Florida limited liability company

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

#### ARTICLE I- NAME:

The name of the limited liability company is: 1962 WEST TENN, LLC

#### ARTICLE II- ADDRESS:

The address of its principal place of business for this limited liability company is:

Nelson Fox 1665 Washington Avenue, PH Miami Beach, FL 33139

The mailing address for this limited liability company is:

Nelson Fox 1665 Washington Avenue, PH Miami Beach, FL 33139

## ARTICLES III- REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

The name and the Florida address of the registered agent are:

Nelson Fox 1665 Washington Avenue, PH Miami Beach, FL 33139

Having been named as registered agent and to accept service of process for the above state 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 im familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Nelson Fox, Registered Agent

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ARTICLE IV- This is a member managed Company. The name and address of each person authorized to manage and control the Limited Liability Company:

TITLE:

NAME AND ADDRESS:

Member

Nelson Fox

1665 Washington Avenue, PH Miami Beach, FL 33139

ARTICLE -V - Effective Date, if other than the date of filing: N/A (Optional)

ARTICLE- VI- Other provisions, if any.

REQUIRED SIGNATURE:

Nelson Fox, Manager

(In accordance with Section 605.0203 (1)(b), Florida Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 s817.155, F.S.)