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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Account Name : COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COHEN
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: archie@stoltzcompanies.com

FLORIDA LIMITED LIABILITY CO.
COURTHOUSE PARTNERS GP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE
TALLAHASSEE, FL

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Corporate Filing Menu

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August 21, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

COHEN NOFRIS

SUBJECT: COURTHOUSE PARTNES GP, LLC
REF: W19000077443

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.

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Neysa Culligan
Regulatory Specialist IV

FAX Aud. #: H19000249096
Letter Number: 219A00017235

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: COURTHOUSE PARTNERS GP, LLC

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:

DAVID B. NORRIS, ESQ.

Name of Person

Firm/Company

Address

NORTH PALM BEACH, FL 33408

City/State and Zip Code

archie@stoltzcompanies.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David B. Norris at (561) 844-3600
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

COURTHOUSE PARTNERS GP, 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:301 Yamato RoadsameSuite 3199 Suite 3199Boca Raton, FL 33431

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(This 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:

David B. Norris, Esq.

Name

712 U.S. Highway One, Suite 400Florida street address (P.O. Box **NOT** acceptable)North Palm BeachFL33408

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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TALLAHASSEE, FL

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:

A. Archie Stoltz, II

301 Yamato Road, Suite 3199

Boca Raton, FL 33431

MGR

Morris L. Stoltz, II

301 Yamato Road, Suite 3199

Boca Raton, FL 33431

(Use attachment if necessary)

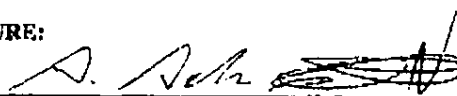
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

A. Archie Stoltz, II, Manager

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)