LZ0000293711

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Office Use Only



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UN/25/26 0:00/ UU/ ##130:00



Jerich Know for



September 15, 2020

SHERWIN RILEY 13155 SW 13TH STREET DAVIE, FL 33325

SUBJECT: LESWIN REAL ESTATE, LLC

Ref. Number: W20000105346

We have received your document for LESWIN REAL ESTATE, 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):

The effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Letter Number: 020A00017532

Derrick Thompson Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: New Filing Division of O	Section Corporations			
Subjects.	LESWI	N REAL ESTA	NTE, LLC	
SUBJECT:	Name of	Limited Liabi	hty Company	
The enclosed Articles	of Organization and feets) are submitted	Hor filmg.	
Please return all corre	spondence concerning the	matter to the	fallowing.	
		SHERWIN	RHLEY	
		Name of	Person	
	LE	SWIN REAL E	ESTATE, LLC.	
		Firm/Co	impany	
		13155 SW 13	TH STREET	
		Addr	css	
		DAVIE, FL.	33325	
	I rewisi	City/State an	d Zip Code E@GMAIL.COM	
	E-mail address: (to be u			on)
for further information	concerning this matter, pl			
SHERWIN		954	393-7337	
N N	ame of Person	Area Code	Daytime Telephone	: Number
Englaced is a check for	e the following amount:			
□\$125.00 Filing Fee	■\$130,00 Filing Fee Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose
New	ling Address Filing Section Sion of Corporations		Street Address New Filing Section Di The Centre of Tallaha	
P.O	Box 6327 shassee, FL 32314		2415 N. Monroe Stree Tallahassee, Ft. 3230	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE II - Address:	ontain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
	rt address of the principal off	ice of the Limited Liability Company is.
<u>Prin</u>	cipal Office Address:	Mailing Address:
13155 SW 13TH	STREET	13155 SW 13TH STREET
DAVIE, FL 3332:	\$	DAVIE, FL. 33325
he Limited Liability Compa other business entity with a	any cannot serve as its own B an active Florida registration cet address of the registered a SHER	igent are:
'he Limited Liability Compa nother business entity with a	any cannot serve as its own F an active Florida registration cet address of the registered a	tegistered Agent. You must designate an individual a gent are: SWIN RILEY Name
The Limited Liability Companiother business entity with a	any cannot serve as its own B an active Florida registration cet address of the registered a SHER	tegistered Agent. You must designate an individual of the second
'he Limited Liability Compa nother business entity with a	any cannot serve as its own B an active Florida registration cet address of the registered a SHER	tegistered Agent. You must designate an individual a gent are: SWIN RILEY Name
'he Limited Liability Compa iother business entity with a	any cannot serve as its own B an active Florida registration cet address of the registered a SHER	tegistered Agent. You must designate an individual of the second

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" - Authorized Member "MGR" - Manager MGR SHERWIN RILEY 13155 SW 13TH STREET DAVIE, FL 33325 (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 Note: If the date inserted in this block does not meet the applicable statutory filing regions, 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: TURE: 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.

Filing Fccs:

SHERWIN RILEY
Typed or printed name of signee

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

5 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)