

L210000347614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

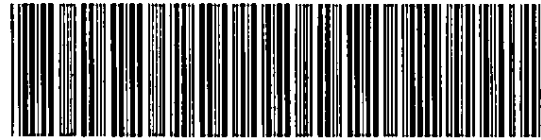
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: TMT SE 21 ST 400, 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:

JENNIFER G. LEE, ESQ

Name of Person

HAROLD H. WEISMAN, PA

Firm/Company

14416 S. MILITARY TRAIL

Address

DELRAY BEACH, FL 33484

City/State and Zip Code

exelteex@aol.com

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

For further information concerning this matter, please call:

JENNIFER G. LEE, ESQ 561 498-0017
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF ORGANIZATION
OF
TMT SE 21 ST 400, LLC**

ARTICLE I – NAME

The name of the limited liability company is **TMT SE 21 ST 400, LLC**. ("company").

ARTICLE II – ADDRESS

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

Principal Office Address:
3659 Lynn Lane
Wantagh, New York 11793

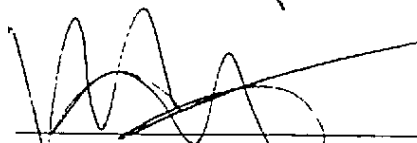
Mailing Address:
3659 Lynn Lane
Wantagh, New York 11793

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

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

HAROLD H. WEISMAN, P.A., ATTORNEY AT LAW
14416 S. Military Trail
Delray Beach, Florida 33484

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.



HAROLD H. WEISMAN, P.A., ATTORNEY AT
LAW

ARTICLE IV - MANAGERS OR MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

AMBR

Terry E. Schmidt
33 Horton St.
Malverne, New York 11565

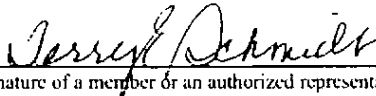
AMBR

Tracy Schmidt
3659 Lynn Lane
Wantagh, New York 11793

AMBR

Marc Trafficanda
3659 Lynn Lane
Wantagh, New York 11793

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.

Terry E. Schmidt

Typed or printed name of signee