# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H220003119933)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : KATZ BASKIES & WOLF PLIC

Account Number : I20080000071 Phone : (561)910-5700 Fax Number : (561)910-5701

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: 19ff. baskles (

## FLORIDA LIMITED LIABILITY CO.

Fighting Creek Holdings LLC

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Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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Corporate Filing Menu

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### COVER LETTER

TO:	New Filing Sect Division of Corp						
SUBJEC		æk Holdings LLC					
SULUE	- I ·	Name	of Limited Lia	bility Company			
The enci	losed Articles of (	Organization and fe	e(s) are submitt	ted for filing.			
Please re	etum all correspo	ndence concerning	this matter to th	e following:			
	Jeffrey A. Ba	skies					
			Name	of Person		•	_
	Katz Baskies	& Wolf PLLC					
			Firm	Company			<del></del>
	3020 North N	dilitary Trail Suite	100				
			A	dress			_
N.	Boca Raton,	FL 33431					
	<del></del>	••-	City/State	and Zip Code			
		catzbaskies.com		re annual report notificat	ion)		_
				re minuar report notificati	ion)		
For furthe	er information co	ncerning this matter	, please call:				
	Jeffrey A. Ba	skies	561 at (	910-5700 )			
	Nam	e of Person	Area Code	Daytime Telephon	e Number	•	
Enclose	d is a check for ti	ne following amoun	t:				
	.00 Filing Fee	☐\$130.00 Filing Certificate of Sta	Fee & 🖂	\$155.00 Filing Fee & nified Copy ional copy is enclosed)	□\$160.00 Certificate Certified ( (additional c	of Status	
	New F Divisio P.O. B	ig Address iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810	FLORIDA	PH 12: 35

From: Katz Baskies & Wolf PLLC

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ARTICLESOF	ORGANIZATION FOR F	LORIDA UM	TED LIABILITY COMPANY	
ARTICLE I - Name: The name of the Limited Liability	Company is:			
FIGHTING CREEK F (Must contain		iability Com	pany, "L.L.C.," or "LLC.")	_
ARTICLE II - Address: The mailing address and street add	dress of the principal of	tice of the Li	mited Liability Company is:	
<u>Principa</u>	Office Address:		Mailing Address:	
6726 N. Ocean Blyd. Ocean Ridge, Florida	33435	<del></del>	6726 N. Ocean Blvd. Ocean Ridge, Florida 33435	_
another business entity with an ac	annot serve as its own tive Florida registration	Registered Ap n.)	Agent's Signature: gent. You must designate an individual or	
The name and the Florida street a	idress of the registered	agent are:		
	KATZ BASKIES & V	WOLF PLLC		
		Name		
	3020 NORTH MILIT	ARY TRAIL	SUITE 100	
	Florida street address	(P.O. Box <u>N</u>	OT acceptable)	
	BOCA RATON	FL	_33431	

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..

State

City

Zip

(CONTINUED)

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Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	DALIA OLIVERA 6726 N. Ocean Blyd. Ocean Ridge, Florida 33435
	(Acar Riget. : rojida 554.15
	· · ·
(Use attachment if necessary)  TCLE V: Effective date, if other than the effective date is listed, the date must	he date of filing:
TCLE V: Effective date, if other than the defective date is listed, the date must late of filing.)  E: If the date inserted in this block does document's effective date on the Department.	t be specific and cannot be more than five business days prior to or 90 days as not meet the applicable statutory filing requirements, this date will not be list timent of State's records.
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