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To:

Division of Corporations Fax Number : (850)617-6381

From:

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Account Number	:	I2016000017	
Phone	:	(855)498-5500	
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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.

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Corporate Filing Menu

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COVER LETTER

TO: New Filing Section Division of Corporations

First Class Partners LLC
SUBJECT:

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:

Daniel Donovan

Name of Person

First Class Partners LLC

Firm/Company

1000 N. US Highway 1 #810

Address

Jupiter, FL 33477

City/State and Zip Code

ddonovan@stratoscope.com

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

For further information concerning this matter, please call:

Daniel Don	ovan at (770	312-7925			2	
Na	· · ·	Arca Code	Daytime Telephon	e Number		2 001	
Enclosed is a check for	the following amount:					r.) 	1
□\$125.00 Filing Fee	□\$130.00 Filing Fee Certificate of Status	Certifie	i.00 Filing Fee & d Copy 1 copy is enclosed)	State of State Certificate of State Certified Copy (additional copy is c	us &	PH12: 35	•
New Divis P.O.	ing Address Filing Section ion of Corporations Box 6327 hassee, FL 32314	1	Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre Fallahassee, FL 3230	assee et, Suite 810			

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

First Class Partners 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:

First Class Partners LLC First Class Partners LLC 1000 N. US Highway 1 #810 1000 N. US Highway 1 #810 Jupiter, FL 33477 Jupiter, FL 33477

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

(The 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:

Daniel Donovan							
	Name						
1000 N. US Highwa	y 1 #810						
Florida street address (P.O. Box NOT acceptable)							
Jupiter	FL	33477					
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..

/s/ Daniel Donovan

Registered Agent's Signature (REQUIRED)

(CONTINUED)



Mailing Address:

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ARTICLE IV-

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

MGR" = Manager AMBR	Daniel Donovan	
AMDR	1000 N. US Highway 1 #810	
	Jupiter, FL 33477	
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Use attachment if necessary)		

(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.)

<u>Note:</u> 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.

REOUIRED SIGNATURE:

/s/ Daniel Donovan		
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.	22 C	
Daniel Donovan Typed or printed name of signee	GCT 21	-,
Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)	P#12: 35	- J