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TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: EMPIRE CORPORATE KIT COMPANY
1492 W FLAGLER ST
SUITE 200
MIAMI FL 33135- 8-
CONTACT: RAY STORMONT
PHONE: (305) 541-3094
FAX: (305) 541-3770

(((H95000000256))) DOCUMENT TYPE: LIMITED LIABILITY COMPANY

NAME: STONEBRIDGE, L.C.

FAX AUDIT NUMBER: H95000000256
DATE REQUESTED: 01/06/1995
CERTIFIED COPIES: 1
NUMBER OF PAGES: 4
ESTIMATED CHARGE: $337.50

CURRENT STATUS: REQUESTED
TIME REQUESTED: 16:12:21
CERTIFICATE OF STATUS: 0
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ARTICLES OF ORGANIZATION

OF

STONEBRIDGE, L.C.

A Florida Limited Liability Company

The undersigned, desiring to form a Limited Liability Company pursuant to Florida Statutes Chapter 608, hereby states as follows:

ARTICLE I

The name of this Limited Liability Company shall be STONEBRIDGE, L.C.

ARTICLE II

The duration of this company shall commence when these Articles of organization are filed with the Secretary of State of the State of Florida until thirty (30) years thereafter, unless earlier dissolved by agreement of the Members hereof or by operation of law.

ARTICLE III

The purpose of which this company is organized is purchase, sale, leasing, management of real estate, or such other business as the Members may agree.

ARTICLE IV

The initial place of business of the corporation shall be 2040 N.E. 163rd Street, Suite 208, Miami, Florida 33162 and its initial registered agent for service of process in the State of Florida shall be JEFFREY M. MARKS.

ARTICLE V

This Company shall be initially capitalized with $100,000.00. No member shall be required other than as provided in the Regulations of this Company to contribute additional capital to the company.

ARTICLE VI

No member may be admitted to the Company other than as provided in the Regulations from time to time adopted by the members hereof.

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of any member hereof, the remaining members shall have the right

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Jeffrey M. Marks
Florida Bar No. 156989
2040 N.E. 163 St.
MIAMI, FL 33162
(305) 940-8632

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pursuant to Regulations adopted by said members to continue the existence of this Company.

ARTICLE VII

This Company shall be managed by a manager. The initial manager of this Company shall be JEFFREY N. MARKS whose address is 2040 N.E. 163rd Street, Suite 208, Miami, Florida 33162.

EXECUTED at Miami, Florida, this 6th day of January, 1995.

JEFFREY N. MARKS

STATE OF FLORIDA :
: ss
COUNTY OF DADE :

The foregoing instrument was acknowledged before me this 6th day of January, 1995, by JEFFREY N. MARKS.

Personally known to me ✓

Produced Identification ___

Type of Identification

NOTARY PUBLIC, State of Florida

OFFICIAL NOTARY SEAL
LORRY A CUSACK
NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO.
COMMISSION NO. CC194531
MY COMMISSION EXP. MAY 5,1996

CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED OFFICE

In accordance with Chapter 48.091, Florida Statutes, the following designation and acceptance is submitted in compliance thereof.

DESIGNATION

STONEBRIDGE, L.C., desiring to organize under the laws of the State of Florida, hereby designates JEFFREY N. MARKS as its registered agent and 2040 N.E. 163rd Street, Suite 208, Miami, Florida 33162 as its registered office.

ACCEPTANCE

Having been named as registered agent for the above named Limited Liability Company, I hereby agree to act in such capacity for such Company at its registered office.

JEFFREY N. MARKS
Registered Agent

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LAW OFFICES MARKS AND ASSOCIATES, P.A. • 2040 N.E. 163rd STREET, MIAMI, FLORIDA 33162 • TEL: (305) 940-8652 FAX: (305) 949-7692

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AFFIDAVIT OF STONEBRIDGE, L.C.
Pursuant to Florida Statute 608.407(2)

STATE OF FLORIDA :
: ss
COUNTY OF DADE :

BEFORE ME, this day, personally appeared JEFFREY N. MARKS, who after being first duly sworn on oath, deposes and says:

1. I am a member, organizer and the manager of STONEBRIDGE, L.C., whose Articles of Organization are being filed simultaneously herewith.

2. That STONEBRIDGE, L.C. has at least two members.

3. That the current members of STONEBRIDGE, L.C. have contributed $100,000.00 and are anticipated to contribute an additional $200,000.00.

4. There is no other property other than cash contributed by the members.

FURTHER AFFIANT SAYETH NAUGHT.

JEFFREY N. MARKS

SWORN TO AND SUBSCRIBED before me this 6th day of January, 1995, by JEFFREY N. MARKS.

Personally known to me ✓
Produced identification ____
_____
Type of Identification

NOTARY PUBLIC, State of Florida
OFFICIAL NOTARY SEAL
LORRY A CUSACK
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC194531
MY COMMISSION EXP. MAY 5,1996

COMMISSION NO.

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FILE NOW: Fee after May 1, will be $263.75

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

96 FEB 19 PM 2:22

SEC. OF STATE
TALLAHASSEE, FLORIDA

FILING FEE	Annual Report $100.00 + $138.75 Corporation Supplemental Fee
$ 238.75	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company

DOCUMENT # L95000000015

STONEBRIDGE, L.C.
2040 NE 163RD STREET STE. 208
MIAMI FL 33162

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

1a. Principal Place of Business Address

2040 NE 163RD STREET STE. 208
MIAMI FL 33162

2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc
City & State	City & State
Zip / Country	Zip / Country

3. Date Organized or Qualified	3a. State of Formation
01/09/1995	FL

4. FEI Number: 65-0544211 ☐ Applied For ☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired $8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent
MARKS, JEFFREY N 2040 NE 163RD STREET STE. 208 MIAMI FL 33162	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc City

900001720888
02/22/96 01003--029
*PL 238.75 ****238.75

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(New Registered Agent Accepting Appointment) (FOR Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	MARKS, JEFFREY N	2040 NE 163RD STREET STE.	MIAMI FL

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: _____ JEFFREY N. MARKS 2/2/96 (305)949-5261
(Required) (Name of Person Authorized to Sign) (Date) (Daytime Phone #)

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