

TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY

L9600000 1043

Department of
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: C-4 L. C.
(Proposed limited liability company name - must include suffix)

300001955183
-09/24/96--01143--001
****293.75 ****293.75

Enclosed is an original and one (1) copy of the articles of organization and a check for :

☐ \$285.00
Filing Fee
& Registered
Agent designation

☒ \$293.75
Filing Fee,
Registered Agent
Designation &
Certificate

☐ \$337.50
Filing Fee,
Registered Agent
Designation &
Certified Copy

☐ \$346.25
Filing Fee,
Registered Agent
Designation,
Certified Copy &
Certificate

FROM: C-4 L. C.
Name (Printed or typed)
c/o Multi-Bank Securities, Inc.
2400 East Commercial Blvd. #322
Address

FT. LAUDERDALE, FL 33308
City, State & Zip

(954) 351-6930
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 OCT -3 PM 1:48

FILED

W96-20313



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

September 26, 1996

**C-4 L.C.
MULTI BANK SECURITIES INC.
2400 E. COMMERCIAL BLVD. #320
FT. LAUDERDALE, FL 33308**

**SUBJECT: C-4 L.C.
Ref. Number: W96000020313**

We have received your document for C-4 L.C. and check(s) totaling \$293.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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 (904) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 196A00044258

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

C-442. C.

ARTICLE II - Address:

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

2400 EAST COMMERCIAL BLVD. #320
FT. LAUDERDALE, FL 33308

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

12/31/98

ARTICLE IV - Management:

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

Martin R. Drews
Misuk Drews
25359 Harcourt
Farmington Hills, MI
48336

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

The existing members of this LLC must approve the admission of new members by unanimous vote. Upon such approval, new members shall be accorded all rights associated with membership in this LLC.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

The unanimous approval of the remaining members is required to continue the business of this LLC upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event that terminates the continued membership of a member in this limited liability company.

NOTE: If no provisions are to be made in Article V and VI remove this page before submitting for filing with the Department of State.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

C-44 L. C.

2. The name and address of the registered agent and office is:

Michael W. Drews
c/o Multi-Bank Securities, Inc.
2400 E. COMMERCIAL AVE. #320
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

FT. LAUDERDALE FL 33308
(City/State/Zip)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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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.

Michael W. Drews
(Signature)

9/23/96
(Date)

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of C-442, C.

deposes and says:

1) the above named limited liability company has at least two members

2) the total amount of cash contributed by the member(s) is

\$ 6,000

3) if any, the agreed value of property other than cash contributed by member(s) is
A description of the property is attached and made a part hereto.

\$ _____

4) the amount of cash or property anticipated to be contributed by member(s) is

\$ 94,000

5) the total amount of 2, 3, and 4 is

\$ 100,000

Michael M. Davis

Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the
execution of this affidavit constitutes an affirmation under the
penalties of perjury that the facts stated herein are true.)