## FOR FLORIDA LIMITED LIABILITY COMPANY

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

400002136824--2 -04/08/97--01113--001 \*\*\*\*346.25 \*\*\*\*346.25

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

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit \$ 35.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50. Please send one check for the total amount made payable to the Florida Department of State.

FROM:

FREDERICK G. WIRTALA

Name (Printed or typed)

10672 ST THOMAS DRIVE

Address

BOCA RATON, FL 33498

City, State & Zip

561.361.0666 X 203

Daytime Telephone number

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ANDREW LAUREN, L.C.

**ARTICLE II - Address:** 

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

10672 ST THOMAS DRIVE BOCA RATON, FL 33498

**ARTICLE III - Duration:** 

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

99 YEARS

ARTICLE IV - Management: (check and complete the appropriate statement)

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

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:

FREDERICK G. WIRTALA 10672 ST. THOMAS DRIVE BOCA RATON, FL 33498 HARVEY PLAVIN 5505 N. MILITARY TRAIL BOCA RATON, FL 33496

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of	· · ·	
ANDREW LAUREN, L.C. deposes and say	ys:	
1) the above named limited liability company has at least two members		
2) the total amount of cash contributed by the member(s) is	<u>\$ 100,000</u> .	
<ol> <li>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.</li> </ol>	<b>\$</b>	
4) the amount of cash or property anticipated to be contributed by member(s) is	\$ <u>400,000</u> .	
5) the total amounts of 2, 3 and 4 is	\$ 500,000	

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.)

## 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.

	ANDREW LAUREN, L.C.	
The name	e and address of the registered agent and office is:	97 APR -9 SECRETARY TALLAHASS
	FREDERICK G. WIRTALA	H9 =
	(NAME)	E FLORIDA
	10672 ST THOMAS DRIVE	DH.
	(P. O. Box <u>not</u> acceptable)	
	BOCA RATON, FL 33498	
-	(CTTY/STATE/ZIP)	<del></del>
ited liabil	named as registered agent and to accept service of process j lity company at the place designated in this certificate, I as registered agent and agree to act in this capacity. I further a	hereby accept that agree to comply wi
	s of all statutes relating to the proper and complete performance	

Filing Fee: \$ 35 for Designation of Registered Agent

(SIGNATURE)

SECTION TAIL COMPERCIAL Section 215.26, Florida Statules, states in part, applications for retuinds as provided in this section shall be filled with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred. Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.
else such right shall be barred." Three years is generally interpreted as meaning interpret
Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section*, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.
Name: Benjamin R. Jacobi, P.A. EIN or SS#: 65-0462038
Address: 1313 NE 125 Str.
No. Miami, FL 33161
Amount: \$78.75 Date Paid /2/31/96
Reason for claim: Duplicate filing.
NAME: DRAGONFLY GROUP, LLC Document number M97000000095
Certified true and correct this 25 day of March, 1997.
* Must be completed if authority is other than Section 215.26, Florida Statutes.
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For Agency Use Only  Agency recommends approval of above claim and submits the following information to
substantiale the claim: Amount of recommended refund \$ 78.73.  The amount requested above was originally deposited into the State Treasury, as a part of the funds deposited on the state Treasury, as a part of the funds deposited on the state Treasury.
Slate Treasurer's Receipt No. O1010-003 dated 01.4.3/972
Name of account
Statutory Authority for Collection 608:0452
It is requested that payment be made from the following account:
NAME OF ACCOUNT 452 0 2 1/3 0 0 0 1/4 5/3 0 0 0 0 0 0 2 2 0 0/2 0 0 0 0 0 0 0 0 0
Genged rice macornol this
Department of State: Division of Corporations  (Agency)  (Agency)