

L99000000371

Ruden, McClosky
Requestor's Name

Address

City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Capital Planning Group (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

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- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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****675.00 ****337.50

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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Name	_____
Availability	_____
Document	_____
Examination	_____
Updater	_____
Updated	_____
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W. P. Verifier	_____

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TALLAHASSEE, FLORIDA

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
CAPITAL PLANNING GROUP LLC,
a Florida Limited Liability Company**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. **NAME.** The name of the Limited Liability Company is CAPITAL PLANNING GROUP LLC (the "Company").
2. **PERIOD OF DURATION.** The period of duration of the Company shall be perpetual.
3. **PURPOSE.** The purpose for which the Company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.
4. **MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE.** The street address of the principal office and mailing address of the Company is 6301 NW 5th Way, Suite 5010, Fort Lauderdale, Florida 33309.
5. **REGISTERED AGENT.** The name and address of the initial registered agent for the Company is: Neil Shafsky, 6301 NW 5th Way, Suite 5010, Fort Lauderdale, Florida 33309.
6. **ADDITIONAL MEMBERS.** Members may admit additional members upon the consent of a majority in interest of the then existing members.
7. **CONTINUITY OF BUSINESS.** The Company shall not be dissolved upon 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 Company.

Prepared by: Thomas O. Katz, Esq., FL Bar # 355836
Ruden, McClosky, et al, P.O. Box 1900
Ft. Lauderdale, FL 33301
Phone: 954-764-6660 Fax: 954-764-4996

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8. **MANAGEMENT.** The Company shall be managed its members, and their names and addresses are:

<u>Name</u>	<u>Address</u>
Seitlin, Inc.	6301 NW 5th Way, Suite 5010 Fort Lauderdale, Florida 33309
MF Planning Group LLC	Brickell Bay Office Tower 10912 S.W. 59th Court Miami, Florida 33156.
M. Stephen Jackman	6301 NW 5th Way, Suite 5010 Fort Lauderdale, Florida 33309

The undersigned has executed these Articles of Organization on the 20th day of January, 1999.

SEITLIN, INC., Member

By: 

Prepared by: Thomas O. Katz, Esq., FL Bar # 355836
Ruden, McClosky, et al, P.O. Box 1900
Ft. Lauderdale, FL 33301
Phone: 954-764-6666 Fax: 954-764-4996

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned authorized representative and managing member of CAPITAL PLANNING GROUP LLC deposes and says:

1. The above named limited liability company has at least one member.
2. The total amount of cash contributed by the members is \$150,000.00.
3. No property other than cash is being contributed by the members.
4. No additional cash or property is anticipated to be contributed by the members.
5. The total amount of contributions by the members is \$150,000.00.

SEITLIN, INC., Member

By: 

(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.)

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**CERTIFICATION OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, 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: CAPITAL PLANNING GROUP LLC.
2. The name and address of the registered agent and office is: ---

Neil Slafsky
6301 N.W. 5th Way, Suite 5010
Fort Lauderdale, Florida 33309

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 its 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.



Neil Slafsky
Registered Agent

1/20/99
(Date)

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