

# L99000006495

## ATTORNEYS' TITLE

Requestor's Name

660 E. Jefferson St.

Address

Tallahassee, FL 32301

850-222-2785

City/St/Zip

Phone #

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

1- SHERIDAN EAST APTS LLC

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of State

### NEW FILINGS

<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<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

### 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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 OCT -7 AM 9:04

RECEIVED  
99 OCT -7 PM 3:49  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

200003009292--6  
-10/08/99--01001--022  
\*\*\*\*155.00 \*\*\*\*155.00

Examiner's Initials

**MJH**

ARTICLES OF ORGANIZATION  
OF  
SHERIDAN EAST APTS, LLC

**ARTICLE I - NAME**

The name of the limited liability company is SHERIDAN EAST APTS, LLC

**ARTICLE II - DURATION**

The limited liability company shall have perpetual existence.

**ARTICLE III - PURPOSE AND POWERS**

Except as restricted by these Articles of Organization, this limited liability company is organized for each and every legal and lawful purpose for which a limited liability company may be organized pursuant to the Florida Limited Liability Company Act.

Except as restricted by these Articles of Organization, this limited liability company shall have and may exercise all powers and rights which a limited liability company may exercise under Florida law or the laws of the United States of America.

**ARTICLE IV - PRINCIPAL OFFICE**

The mailing address and the street address of this limited liability company shall be:

c/o Ramon Cacicedo  
6505 Blue Lagoon Drive #240  
Miami, FL 33126

**ARTICLE V - INITIAL REGISTERED AGENT AND OFFICE**

The initial registered agent for this limited liability company and the street address of the initial registered office are:

Karl W. Adler  
1700 Northeast 26th Street #4  
Ft Lauderdale, FL 33305

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 OCT - 7 AM 9:04

## ARTICLE VI - INITIAL CO-MANAGERS

The limited liability company shall be managed by one or more manager. This limited liability company shall initially have two managers. The number of managers of this company may be changed in accordance with the regulations of the company. The names and addresses of the initial co-managers are as follows:

KARL W. ADLER: Co-Manager  
1700 Northeast 26th Street #4  
Fort Lauderdale, FL 33334

RAMON CACICEDO: Co-Manager  
6505 Blue Lagoon Drive #240  
Miami, FL 33126

The initial Co-Managers shall each serve until his death, permanent disability (as defined in the Regulations) or resignation and his successor(s) is elected and qualified.

## ARTICLE VII - REGULATIONS

The regulations of this limited liability company may only be adopted, amended, altered or repealed by a vote of approval of the members having a seventy-five (75%) percent or more membership interest and approval of a majority of the managers.

## ARTICLE X - AMENDMENT

This limited liability company reserves the right to amend, alter or repeal any provision contained in these Articles of Organization in accordance with the Florida Limited Liability Company Act.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 31<sup>st</sup> day of September, 1999.

  
KARL W. ADLER  
Authorized Representative

## ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

I hereby accept my appointment as registered agent for SHERIDAN EAST APTS, LLC. As registered agent I am familiar with, and accept, the obligations of this position.

DATE: 9/29/99

Karl W. Adler  
KARL W. ADLER, Registered Agent

STATE OF FLORIDA )

SS:

COUNTY OF BROWARD )

Before me, the undersigned Notary, on this day personally appeared KARL W. ADLER whose name is subscribed to the foregoing instrument, and acknowledged to me that he executed the same for the purposes and consideration therein expressed, and in the capacities stated.

GIVEN UNDER MY HAND AND SEAL OF OFFICE on this 29<sup>th</sup> day of September, 1999.

Diana C. Ross  
NOTARY PUBLIC

My Commission Expires:



Diana C. Ross  
MY COMMISSION # CC652857 EXPIRES  
September 28, 2001  
BONDED THRU TROY FAIR INSURANCE, INC.