## 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



HBOTTONE INSIDE THE RESERVED.



March 14, 2006

JOHN NACARATO 528 VICTORIA BLVD. AUBURNDALE, FL 33823

SUBJECT: JOHN NACARATO INSTALLATIONS LLC

Ref. Number: W06000012318

We have received your document for JOHN NACARATO INSTALLATIONS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the names and street addresses of the members or managers of the limited liability company.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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 (850) 245-6020.

Letter Number: 106A00017525

Tammi Cline Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## **COVER LETTER**

TO:	Registration Sec Division of Cor						
SUBJI	ECT: John N	lacarato Installatio	ons LLC	any)			
		(		,,			
The en	closed Articles of	Organization and fec(s) are s	ubmitted for filing	<b>3.</b>			
Please	return all correspo	ondence concerning this matte	ar to the following	; <b>:</b>			
	•	_	·				
	John naca		N1				
		(.	Name of Person)				
	John Nac	arato Installations	3 LLC				
		(	Firm/Company)				
	528 Victo	ria Blvd					
			(Address)				
	Auburnde	ale FL <b>3</b> 3823				- <b>:</b>	
	Aubuillu		State and Zip Code	<u></u>	<u> </u>	12/6/5	
			-				
For fur	ther information of	concerning this matter, please	call:				
ماما	a Nacarata		962	206 59	15		<del>-</del> ţ
John Nacarato (Name of Person)			аt <u>(</u> 863 (Атеа Cod	) 206-58 le & Daytime To	elephone Number)	<del></del> (^	T
	•	ŕ	·	·			<u> </u>
Enclos	sed is a check fo	r the following amount:				•	_
<b>₹</b> \$12:	5.00 Filing Fee	\$130,00 Filing Fee & Certificate of Status	\$155.00 F. Certified Cop (additional copy	У	\$160.00 F Certificate of Certified Co (additional copy	Status &	&
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Exc	ourier Addression Section of Corporatio Building ecutive Center see, FL 32301	ons		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

John Nacarato Installations LLC (Must end with the words "Limited Liability Company,	"Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	the principal office of the Limited Liability Company is:
The maining address and sheet address of	the principal office of the Entitled Elability Company is.
Principal Office Address:	Mailing Address:
528 Victoria Blvd	528 Victoria Blvd
Auburndale	Auburndale
FL 33823	FL 33823
(The Limited Liability Company cannot serve as its own business entity with an active (dorida registration.)	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another
The name and the Florida street ad tess o	f the registered agent are:
JOHN NACARATO	
JOHN NACARATO	Name C.
JOHN NACARATO  528 Victoria Blvd	
528 Victoria Blvd	
528 Victoria Blvd	Name
528 Victoria Blvd Fledda str Aubumdale	reet address (P.O. Box <u>NOT</u> acceptable)

(CONTINUED) Page 1 of 2

Registered Venit's Signature (REQUIRED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	John Necarato 528 Victoria BIVO. Auburndale FL 33823
(Use attachment if necessary) <b>LE V:</b> Effective date, if other than the	he date of filing:

**REQUIRED SIGNATURE:** 

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

T-1 1/2

Vacarato
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)