

L07000111762

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

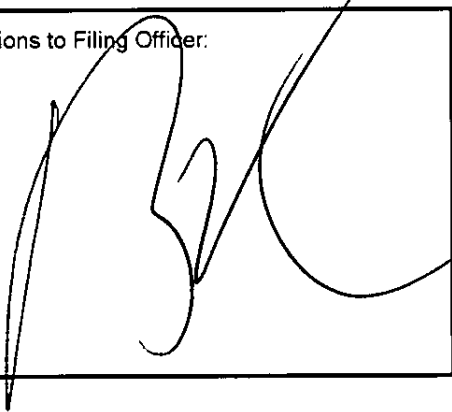
PICK-UP WAIT MAIL

(Business Entity Name)

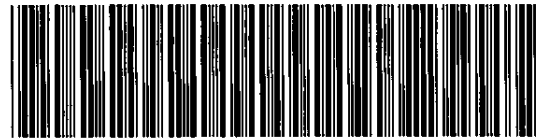
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10/29/07--01003--003 **125.00

RECEIVED
07 OCT 29 AM 9:25
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
07 OCT 29 PM 3:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 29, 2007

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: ESQUIVEL, LLC
Ref. Number: W0700053316

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE

RECEIVED
07 NOV -5 PM 1:47
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

We have received your document for ESQUIVEL, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have **RETAINED** your \$125.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 307A00063188

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ESQUIVEL LLC

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TALLAHASSEE, FLORIDA

- Art of Inc. File _____
- LTD Partnership File _____
- Foreign Corp. File _____
- L.C. File _____
- Fictitious Name File _____
- Trade/Service Mark _____
- Merger File _____
- Art. of Amend. File _____
- RA Resignation _____
- Dissolution / Withdrawal _____
- Annual Report / Reinstatement _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
- UCC 11 Retrieval _____

Signature

Requested by:

SW

10/29

Name

Date

Time

Well-Is

Well-Rick-Is

ARTICLES OF ORGANIZATION
FOR
ESQUIVEL I, LLC

FILED
07 OCT 29 PM 3:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **ESQUIVEL I, LLC**.

ARTICLE II: PRINCIPAL OFFICE

The principal office address of the company is **4605 Dominion Drive, Naples, FL 34112**.

ARTICLE III: MANAGEMENT

The company will be a manager managed Limited Liability Company.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

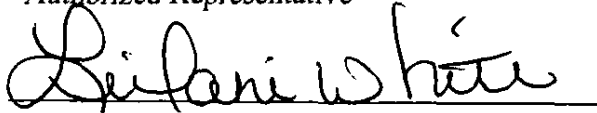
The name and address of the initial registered agent is **Marc L. Shapiro, P.A., 720 Goodlette Road North, Suite 304, Naples, FL 34102.**

ARTICLE V: MANAGER

The name and address of the initial Managing Members of the company is: **Javier Perez, Selma Perez, 4605 Dominion Drive, Naples, FL 34112.**

The undersigned has executed these Articles of Organization this 5th day of November 2007.
"Your Capital Connection, Inc. by, Leilani White, Client Representative"

Authorized Representative



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

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1. The name of the company is: ESQUIVEL LP LLC

2. The name and address of the registered agent and office is:
Marc L. Shapiro
720 Goodletts Rd. N. Suite 304
Naples, FL 34102

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.

4
Marc L. Shapiro