L0500004/833

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

1 DAYAN APR 2 8 2005

TRANSMITTAL LETTER

man mark at a sure			
TO: Registration Section			
Division of Corporations			
are A Source Proportion I.I.C.			
SUBJECT: 4 Square Properties LLC			
(Name of Limited	Liability Company)		
The enclosed Articles of Organization and fee(s) are su	ibmitted for filing.		
799			
Please return all correspondence concerning this matter	to the following:		
Melody Pisano			
	ame of Person)		
YL)	ame of reison)		
4 Square Properties LLC			
	irm/Company)		
V	iiiii Ooiipaij)	69 5 7	
		至。表	
		75 5	
5180 SW Hammock Creek Drive		326	
	(Address)	PR 25 PM 1:55 MAPR 25 PM 1:55 DIVINION OF CORPORATION DIVINION OF CO	
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		製造 5 5	
Palm City FL 34990		92	
(City/	State and Zip Code)	. (3)	
, ,	- ,		
For further information concerning this matter, please of	call:		
•			
## 4 4 m's	744.0000		
	at (561 714-0903		
(Name of Person)	(Area Code & Daytime Te	elephone Number)	
77 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Enclosed is a check for the following amount:			
Characon Piller Pro Characon No. 18 - 19	G 6166 00 200 - F 0	6 61 60 00 EU	
☐ \$125.00 Filing Fee	☐ \$155.00 Filing Fee &	1 \$160.00 Filing Fee,	
Certificate of Status	Certified Copy	Certificate of Status &	
•	(additional copy is enclosed)	Certified Copy	
		(additional copy is enclosed)	
Chaile Addition V Artir as active		nn W File	
STREET ADDRESS:	MAILING A		
Registration Section	Registration S		
Division of Corporations	Division of Co		
409 E. Gaines Street	P.O. Box 632		
Tallahassee, Florida 32399	Tallahassee, Florida 32314		

ARTICLE I - Name:	pany is:
The name of the Limited Liability Com	pany is:
4 Square Properties LLC	
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5180 SW Hammock Creek Drive	5180 SW Hammock Creek Drive
Palm City FL 34990	Palm City FL 34990
ARTICLE III - Registered Agent, Re The name and the Florida street address	gistered Office, & Registered Agent's Signature: s of the registered agent are:
-	
The name and the Florida street address	
The name and the Florida street address	S of the registered agent are: Name
The name and the Florida street address Melody Pisano 5180 SW Hammock	S of the registered agent are: Name
The name and the Florida street address Melody Pisano 5180 SW Hammock	Name Creek Drive
The name and the Florida street address Melody Pisano 5180 SW Hammock 6 Florida Palm City FL 34990	Name Creek Drive

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	E BY
"MGR" = Manager	` **	100 % 1
"MGRM" = Managing Member		THE STATE OF THE S
MGRM	Melody Pisano	15.32 F
	5180 SW Hammock Creek Drive	
	Palm City FL 34990	
MGR	Melainey Gunning	\$3
	5374 SE Running Oaks Circle	
	Stuart FL 34997	
MGR	Cathy Myers	
	1134 NW 34th Street	-
	Stuart FL 34994	
mgr	James Dammerick	
	2617 SW Solana Lane	
	Port St Lucie FL 34952	

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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

Melody Pisano

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)