

L06000108816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

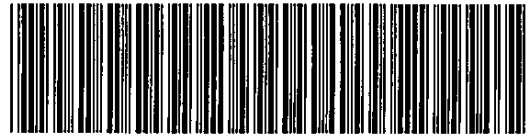
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800081385568

11/06/06--01025--027 \*\*160.00

FILED  
06 NOV -6 AM 11:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*The Mullan Group LLC  
3409 Pelican Landing Parkway #1  
Bonita Springs, FL 34134-0938  
239-949-7711 Fax 239-949-7117*

### NOTES

*Elise:*

*Please fax to IRS @  
1-631-447-8960 the SS4 form  
FACE UP*

*Take the letter I wrote which  
follows and mail in envelope  
Address the envelope as follows.*

*Secretary of State of Florida  
Regulation Section  
Division of Corporations  
PO Box 6327*

*Tallahassee, FL 32314*

*Your lover boy*

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I – NAME

The name of the Limited Liability Company is: **VADALA REALTY LLC**

## ARTICLE II – ADDRESS

The mailing address of the principal office of **Vadala Realty LLC** is **P O Box 100073 Cape Coral, Fl. 33910**. The property where **Vadala Realty LLC** will operate their business is **1211 Miramar Street Cape Coral, Fl 33904**.

## ARTICLE III – DURATION

The period of duration for the Limited Liability Company shall be 30 years. **Vadala Realty LLC** will cease to exist on December 31, 2036, unless extended by a resolution of the Members and approval by the Secretary of State of the State of Florida.

## ARTICLE IV – MANAGEMENT

The Limited Liability Company will be managed exclusively by **Anthony G Vadala**. His place of residence is **1327 SE 17<sup>th</sup> Street Cape Coral, Fl.** His telephone number is **(239)898-2120**. He is the Manager of **Vadala Realty LLC** which is a manager-managed company. **Anthony G Vadala** is the Registered Agent for **Vadala Realty LLC**.

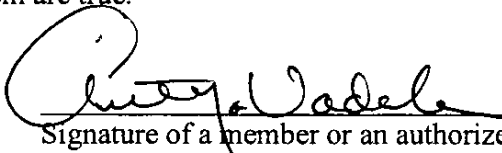
## ARTICLE V – ADMISSION OF ADDITIONAL MEMBERS

The initial members of **Vadala Realty LLC** are **Anthony G Vadala** and **Kimberly J Vadala**, husband and wife. He will serve as Manager and they both reside at **1327 SE 17<sup>th</sup> Street Cape Coral, Fl. 33904**. Additional members may be admitted upon the unanimous written consent of the Initial Member. Unless otherwise agreed to by the Initial Members, such members shall acquire no more than a total of thirty (30) percent of the membership interest in the LLC. The Initial Member and Additional Members, if any, are referred collectively as the "Members".

## ARTICLE VI – MEMBERS RIGHT TO CONTINUE BUSINESS

The right, if given, of the remaining members of the limited liability company to continue on 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 limited liability company shall be exercised in writing within one hundred eighty (180) days after such event. All the remaining members must give written consent to continue the LLC.

IN WITNESS WHEREOF, this certificate has been subscribed this 26th day of October, 2006 by the undersigned who affirms that the statements made herein are true.

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

(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.)

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR  
608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED  
LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND  
REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

VADALA REALTY LLC

2. The name and the Florida street address of the registered agent are:

ANTHONY G VADALA

Name

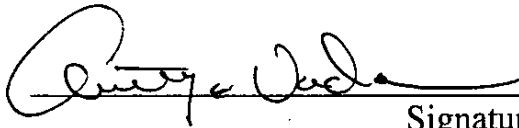
1327 SE 17<sup>th</sup> STREET

Florida Street address

Cape Coral, Fl.33990

City, State & Zip

*Having been named as registered agent and to accept services 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 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.*



Signature

Filing Fee: \$25 for Designation of Registered Agent

FILED  
06 NOV -6 AM 11:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA