

L18000128742

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To:

Division of Corporations
Fax Number : (850)617-6381

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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18 MAY 23 AM 11:05
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
SCARPANTONIO & DI FRANCESCO HOLDING LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
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T COLLINS

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May 23, 2018

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: SCARPANTONIO & DI FRANCESCO HOLDING LLC
REF: W18000049104

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return the corrected original and one copy of 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) 245-6052.

Taylor B Collins
Regulatory Specialist II
New Filing Section

FAX Aud. #: H18000157851
Letter Number: 018A00010754

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18 MAY 23 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Scarpantonio & Di Francesco Holding LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

3517 NW 115th AVE
Doral FL 33178

ARTICLE III - Registered Agent, Registered Office:


The name and the Florida street address of the registered agent are: *(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)*

3517 NW 115th AVE
Doral FL 33178
Guillermo Scarpantonio

ARTICLE IV

The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)

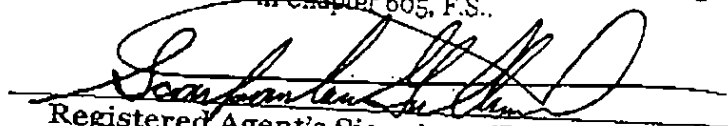
Guillermo Scarpantonio (AMBR)
Gianni di Francesco (AMBR)

Required Signatures:
Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Guillermo Scarpantonio
Typed or printed name of signee

Having been named as registered agent and to accept service 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 as provided for in Chapter 605, F.S..


Registered Agent's Signature (REQUIRED)

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