## L030000 41904

(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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BK.

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		155.	
CORPORATE			
ACCESS, INC. P.O. Box	236 East 6th Avenue . Tallahassee, Florida 32303 ox 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666		
	WALK IN PICK UP 10-30-03 below	FILED WITH	
CERTIFIED COPY	CUS		
РНОТО СОРУ	FILING LL		
(CORPORATE NAME & DOCUMENT #)		1. <u>u</u> 1.u	
(CORPORATE NAME & DOCUMENT #)	<u> </u>	REC 03 OCT	
(CORPORATE NAME & DOCUMENT #)		RECEIVED  O3 OCT 30 M IG: 8  VISIGN OF CURPORAL	
(CORPORATE NAME & DOCUMENT #)		RATION 22	
(CORPORATE NAME & DOCUMENT #)		·	
PECIAL INSTRUCTIONS		Tage	
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited I	Liability Company is:	2 8
NAPLES ONE LLC	- - -	冒四
ARTICLE II - Address: The mailing address and so 291 Bal Bay Drive	treet address of the principal office of the Limite, #206, Bal Harbour, FL 3315	ed Liability Company is
ARTICLE III - Registere	ed Agent, Registered Office, & Registered Ag	ent's Signature!
The name and the Florida	street address of the registered agent are:	!
	Robert L. Trescott	: _= 
	Name	<u> </u>
	2121 Ponce de Leon Boulevard	#900
	Florida street address (P.Q. Box NOT acceptable)	; ;
	Coral Gables _ FL 33134 City, State, and Zip	<del>.</del> .
liability company at the pla registered agent and agree statutes relating to the prop	istered agent and to accept service of process for ace designated in this certificate, I hereby accept to act in this capacity. I further agree to comply per and complete performance of my duties, and by position as registered agent as provided for in  Registered Agent's Signature	the appointment as v with the provisions of all I am familiar with and
	t (Check box if applicable.) Company is to be managed by one manager or managed company.	more managers and is,
Ly	onal article must be added if an effective date is  Auto Medley  re of a member or an authorized representative of a new process of the second	
of this	ordance with section 608.408(3), Florida Statutes, the ex document constitutes an affirmation under the penalties of facts stated herein are true.)	
Sylv	ia Nexer	· ·
-	Typed or printed name of signce	<del>7. 1= −</del> i
	Filing Fees: \$100.00 Filing Fee for Articles of Org \$ 25.00 Designation of Registered Ag \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	ent