Scott Carlino 14 Royal Palm Way Apt. #401 Boca Raton, FL. 33432

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CORPORATION NAME(S) & DOCT	JMENT NUMBER(S). (if knov	Use Only WO 1-13041 Vn): 00004339662-9 -06/04/01-01066-017
1. (U) 789 - 0 2 595 - 0 (Corporation Name)	(Document #)	****125.00 ****125.00
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Corporation Name)	(Document #)	<u> </u>
4(Corporation Name)	(Document #)	·
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Photocopy	Certified Copy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., O Change of Registered A Dissolution/Withdrawa Merger	Agent 59 5 4
OTHER FILINGS	REGISTRATION/QUALI	FICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	
	E	xaminer's Initials

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 7, 2001

SCOTT CARLINO 14 ROYAL PALM WAY, APT. 401 BOCA RATON, FL 33432

SUBJECT: ASTORIA PARK SOUTH Ref. Number: W01000013041

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

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C." or "L.L.C."

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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 301A00035058

ARTICLE II - Address:		
The mailing address and street address of the principal office of the Limited Liability Company is:		
14 ROYAL Palm WAY #401 BOCA RATION FLA. 33432		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:		
The name and the Florida street address of the registered agent are:		
SCOTT BRANDON CARLINO		
14 Royal Palm WAY #401		
Florida street address (P.O. Box MOT acceptable)		
BUCA RATON FL 33439_ City, State, and Zip		
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 608, F.S		
Scott Carlino		
Registered Agent's Signature		
Article IV - Management (Check box if applicable.)		

ASTURIA PARK SOUTH

ARTICLE I - Name:

The name of the Limited Liability Company is:

therefore, a manager - managed company.

(An additional article must be added if an' effective date is requested)

The Limited Liability Company is to be managed by one manager or more managers and is,

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.)

BRANDON CARLING

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

OI JUN 21 AM IO: 45
SECRETARY OF STATE
TALLAHASSEE. FLORIDA