

LO10000010189

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

SUBJECT: SUZAN S. NOA, LLC

Enclosed are an original and two (2) copies.

**Request that the extra copy be "stamped with the filing date" and returned.**

Filing fee for the articles of organization of Florida Limited Liability Company are enclosed as follows:

\$100.00 Filing fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent

000004437120--1  
-06/22/01--01053--007  
\*\*\*\*125.00 \*\*\*\*125.00

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$5 if a certificate of status is needed. The fee for a certified copy is \$30.

**Please submit one check for the total amount made payable to the Florida Department of State.**

FROM: SUZAN S. NOA

2203 SE 8<sup>TH</sup> AVENUE

CAPE CORAL, FL. 33990

941-839-3411

FILED  
01 JUN 22 AM 8:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

mnt  
6/25

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

SUZAN S. NOA, LLC

## ARTICLE II - Address:

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

2203 SC 8TH AVENUE  
CAPE CORAL, FL 33990

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Hector M. NOA  
Name  
2203 SC 8TH AVENUE  
Florida street address (P.O. Box NOT acceptable)  
CAPE CORAL, FL 33990  
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..*

Hector M. Noa  
Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and, therefore, a manager - managed company.

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

Suzani S. Noa  
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.)

SUZAN S. NOA  
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)

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