

Division of Corporations

L0100018684

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000110844 7)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : MICHAEL A. PYLE, P.A.
Account Number : 120000000053
Phone : (904) 615-9007
Fax Number : (904) 676-2615

LIMITED LIABILITY COMPANY

CLARISA, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

FILED
01 OCT 30 AM 11:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
01 OCT 30 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L01-18684
QR

Electronic Filing Menu

Corporate Filing

Public Access Help

H01000110844 7

**ARTICLES OF ORGANIZATION
OF
CLARISA, LLC**

FILED
01 OCT 30 AM 11:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, *Florida Statutes*, hereby executes the following Articles of Organization.

**ARTICLE I
NAME**

The name of the Limited Liability Company is: **CLARISA, LLC**

**ARTICLE II
ADDRESS**

The street address and the mailing address of the principal office of the Company is: **267 Riverside Drive, Holly Hill, Florida 32117**

**ARTICLE III
REGISTERED OFFICE AND AGENT**

The name and Florida street address of the registered agent is: **Luis Lea Place, 267 Riverside Drive, Holly Hill, Florida 32117**

IN WITNESS WHEREOF, the undersigned Member has executed these Articles of Organization on this 29th day of October, 2001.



LUIS LEA PLACE, Member



**SILVIA PATRICIA LEA PLACE
Member**

(In accordance with Section 608.408(2), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

H01000110844 7

H01000110844 7

ACCEPTANCE OF DESIGNATION

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 608, Florida Statutes.



LUIS LEA PLACE
Registered Agent

FILED
01 OCT 30 AM 11:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H01000110844 7