



# L010000019306

ACCOUNT NO. : 072100000032

REFERENCE : 321380 81823A

AUTHORIZATION :

COST LIMIT : \$ 125 *Patricia Pajito*

ORDER DATE : November 5, 2001

ORDER TIME : 2:59 PM

ORDER NO. : 321380-005

CUSTOMER NO: 81823A

200004666882--6

CUSTOMER: Stephen Navaretta, Esq  
Navaretta & Navaretta  
Attorneys At Law, P.A.  
Suite 203  
1100 Sw St. Lucie West Blvd  
Port St. Lucie, FL 34986

DOMESTIC FILING

NAME: LAKES PLAZA, LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Betty Young - EXT. 1112

EXAMINER'S INITIALS:

*JB*  
*11-8-01*

RECEIVED  
01 NOV -5 PM 4:00  
DIVISION OF CORPORATION  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA  
01 NOV -5 MID:43  
APPROVED  
FILED



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

November 6, 2001

BETTY YOUNG  
CSC

SUBJECT: LAKES PLAZA, LLC  
Ref. Number: W01000025525

We have received your document for LAKES PLAZA, LLC 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 registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration/Qualification Section  
Division of Corporations Letter Number: 001A00060244

01 NOV -5 2:10:43  
RECEIVED  
ALL AMERICA FILING  
ALPHABETICALLY  
FILED

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

Lakes Plaza, LLC

**ARTICLE II - Address:**

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

1880 SE Port St. Lucie Boulevard  
Port St. Lucie, Florida 34952

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

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

Stephen Navaretta

Name

1100 SW St. Lucie West Boulevard, Suite #203

Florida street address (P.O. Box **NOT** acceptable)

Port St. Lucie, FL 34986

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.*

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 is, therefore, a manager - managed company.

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

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.)

Stephen Navaretta

Typed or printed name of signer

**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)