

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

LO2000013453

Ungari, LLC.

800005662468--S
-05/31/02--01003--023
****155.00 ****155.00

FILED
02 MAY 31 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL

RECEIVED
02 MAY 31 AM 11:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

____ Art of Inc. File
____ LTD Partnership File
____ Foreign Corp. File
____ L.C. File
____ Fictitious Name File
____ Trade/Service Mark
____ Merger File
____ Art. of Amend. File
____ RA Resignation
____ Dissolution / Withdrawal
____ Annual Report / Reinstatement
____ Cert. Copy
____ Photo Copy
____ Certificate of Good Standing
____ Certificate of Status
____ Certificate of Fictitious Name
____ Corp Record Search
____ Officer Search
____ Fictitious Search
____ Fictitious Owner Search
____ Vehicle Search
____ Driving Record
____ UCC 1 or 3 File
____ UCC 11 Search
____ UCC 11 Retrieval
____ Courier

Signature _____

Requested by: *WC*

Name _____

Date *5/31*

Time *12:00*

Walk-In _____

Will Pick Up _____

ARTICLES OF ORGANIZATION

OF

UNGARI, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME:

The name of the limited liability company shall be:

UNGARI, LLC

ARTICLE II - ADDRESS:

The mailing address and street address of the principal office of the company shall be:

1551 Main Street
Sarasota, Florida 34237

ARTICLE III - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the State of Florida is:

John E. Napolitano
100 Wallace Avenue, Suite 240
Sarasota, FL 34237

Having been named as the 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.


John E. Napolitano
Registered Agent

FILED
02 MAY 31 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Claudia Moschini

Claudia Moschini
Signature of a manager/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.)

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these articles of organization in Sarasota, Florida, on this 31 day of May, 2002.

Claudia Moschini
Claudia Moschini, Manager/Member

FILED
02 MAY 31 AM 10:31
CLERK OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA
COUNTY OF SARASOTA

Sworn to and subscribed before me this 31 day of May, 2002, by Claudia Moschini, who is personally known to me or produced FL DL # M250-119-68-552-0 as identification.



Kathleen Curtin
MY COMMISSION # DD108599 EXPIRES
April 14, 2006
BONDED THRU TROY FAIN INSURANCE, INC

Kathleen Curtin
Notary Public – State of Florida

(Seal)