

L03000027192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

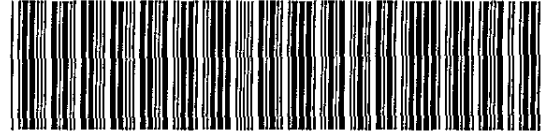
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400021347124

07/08/03--01070--004 **160.00

W 7/24

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL 24 AM 10:48

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE NEW FAEMA CORP. L.L.C
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EMANUELA MASSARI

(Name of Person)

THE NEW FAEMA CORP.

(Firm/Company)

5030 CENTR. SARASOTA PKWY #208

(Address)

SARASOTA FL 34238

(City/State and Zip Code)

For further information concerning this matter, please call:

EMANUELA MASSARI

(Name of Person)

at (941) 923 7577

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

W03820204
JUL 24 AM 10:48
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE NEW FAEMA LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EMANUELA MASSARI
(Name of Person)

THE NEW FAEMA LLC.
(Firm/Company)

5030 SEUT. SARASOTA PRUY #208
(Address)

SARASOTA FL 34238
(City/State and Zip Code)

For further information concerning this matter, please call:

EMANUELA MASSARI at (941) 923 7577
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL 24 AM 10:48



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

- July 16, 2003

EMANUELA MASSARI
THE NEW FAEMA CORP. L.L.C.
5030 CENTR. SARASOTA PKWY #208
SARASOTA, FL 34238

SUBJECT: THE NEW FAEMA CORP. L.L.C.
Ref. Number: W03000020204

We have received your document for THE NEW FAEMA CORP. L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please put the name of the company in Article I. Please note that you must delete the term "CORP." from your name, because a limited liability company is not a corporation, and cannot use the abbreviation "corp." as part of its name.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 903A00041827

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL 24 AM 10:48

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE NEW FAEMA LLC.

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

5030 CENTRAL SARASOTA
PARKWAY APP. 208
SARASOTA FL 34238

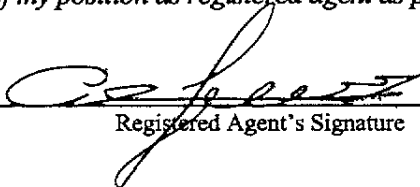
SAME

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

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

MARCELLO GIORDANO
Name
5030 CENTR. SARASOTA PKWY # 208
Florida street address (P.O. Box **NOT** acceptable)
SARASOTA, FL 34238
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

(CONTINUED)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL 24 AM 10:40

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

EMANUELA MASSARI

5030 CENTR. SARASOTA PKWY # 208
SARASOTA FL 34238

MGRM

MARCELLO GIORDANO

5030 CENTR. SARASOTA PKWY # 208
SARASOTA FL 34238

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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.)

EMANUELA MASSARI

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL 24 AM 10:48