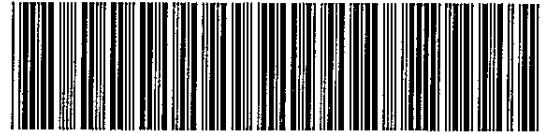


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ALL AMESPE, FLORIDA



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AL

(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

**Syprett, Meshad, Resnick, Lieb, Dumbaugh, Jones, Krotec & Westheimer, P.A.**

ATTORNEYS AT LAW

FILED

- \* Board Certified Civil Trial Lawyer
- \*\* Board Certified Real Estate Lawyer
- + Certified Circuit Court Mediator

1900 Ringling Boulevard  
Sarasota, Florida 34236-5919  
Telephone (941) 365-7171  
Fax (941) 365-7923

03 SEP 17 PM 3: 15

CLERK OF STATE  
TALLAHASSEE, FLORIDA

Shareholders  
John D. Dumbaugh\*\*  
Teresa D. Jones\*\*  
Peter J. Krotec  
M. Joseph Lieb, Jr. +  
John W. Meshad  
Michael L. Resnick  
Jim D. Syprett  
F. Scott Westheimer  
Associates  
Nancy Cason  
Angela D. Flaherty

September 9, 2003

Secretary of State  
Division of Corporations  
Department of State  
409 East Gaines Street  
Tallahassee, Florida 32399

Re: Fiore di Venezia, LLC

Dear Sir:

Enclosed please find our proposed Articles of Organization for Florida Limited Liability Company for the above. I would appreciate your filing the Articles and providing a certified copy to our office. Our check in the amount of \$160.00 is enclosed, which also covers a certificate of status, filing said Articles and certified copy of same.

Thank you for your attention to this matter. If you should have any questions in this regard, please call me.

Very truly yours,

SYPRETT, MESHAD, RESNICK, LIEB,  
DUMBAUGH, JONES, KROTEC &  
WESTHEIMER, P.A.



By: Nancy E. Cason

NEC:pck

Encs.

File No. 20154.001

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is FIORE di VENEZIA, LLC.

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ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: MAILING ADDRESS: 2100 CONSTITUTION BOULEVARD, SUITE 132, SARASOTA, FLORIDA 34231.

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

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

NANCY E. CASON, ESQUIRE

Name

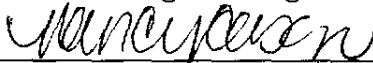
1900 RINGLING BOULEVARD

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

SARASOTA, FLORIDA 34236

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.*



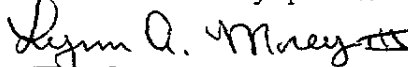
Registered Agent's Signature

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.

ARTICLE V - Effective Date:

The Limited Liability Company's existence shall commence as of the date of execution of this instrument, which shall be within 5 business days prior to filing hereof.



Signature of a member or an authorized representative of a member.

LYNN A. MOREY, III

(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.)

LYNN A. MOREY, III

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)