

LO3 0000 45137

(Requestor's Name)

FROM: (PLEASE PRINT)

PHONE (407) 228-4023

Blair T. Jackson, P.A.
-1238 E. Concord Street
Orlando, FL 32803

☐ PICK-UP

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☐ MAIL

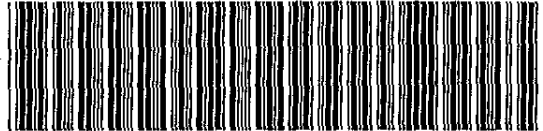
(Business Entity Name)

(Document Number)

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[Signature]

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Giovanni Experiences, LLC

ARTICLE II - Address:

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

Principal Office Address:

2784 Wright Road
Suite # 1000
Overland, Florida,
32765

Mailing Address:

2784 Wright Road
Suite # 1000
Overland, Florida
32765

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

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

Blair T. Jackson

Name

1238 E. Concord Street

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

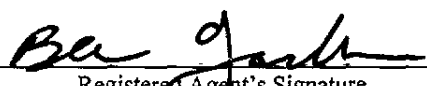
Orlando, FL 32803

FLORIDA

City, State, and Zip

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TALLAHASSEE, FLORIDA

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, Florida Statutes..


Registered Agent's Signature

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

Giovanni Livera

2784 Wright Road
Suite #1000
Oviedo, Florida, 32765

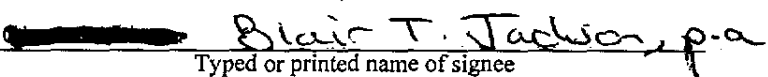
(Use attachment if necessary)

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.)


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)

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