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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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Certified Copies _____

Certificates of Status _____ 1

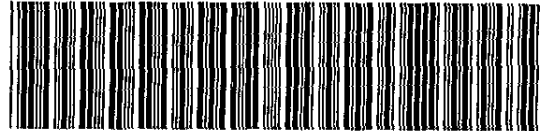
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FILED
03 NOV 14 PM 5:43
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

November 11, 2003

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

Enclosed please find Articles of Organization for Florida Limited Liability Company.
Along with a cheque in the amount of \$130.00 for Filing Fees for Articles of Organization, Designation of Registered Agent and Certificate of Status.

Thank you,

A handwritten signature in black ink, appearing to read "Lorie Battaglini", written in a cursive style.

Lorie Battaglini
99 SE Mizner Blvd., #721
Boca Raton, Florida 33432

Telephone: 561 445 2451 or 561 367 9757

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lorie Battaglini, "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:

Lorie Battaglini
(Name of Person)

Lorie Battaglini, "LLC"
(Firm/Company)

99 SE Mizner Blvd #721
(Address)

Boca Raton, FL 33432
(City/State and Zip Code)

For further information concerning this matter, please call:

Lorie Battaglini at (561) 445-2451
(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

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Lorio Battaglini, LLC

ARTICLE II - Address:

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

Principal Office Address:

99 SE Mizner Blvd #721
Boca Raton, FL
33432

Mailing Address:

99 SE Mizner Blvd. #721
Boca Raton, FL
33432

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

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

Lorio Battaglini
Name
99 SE Mizner Blvd. #721
Florida street address (P.O. Box NOT acceptable)
Boca Raton, FL 33432
City, State, and Zip

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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..

[Signature]
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

Lorie Battaglini
99 SE Mizner Blvd #721
Boca Raton, FL 33432

(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.)

Lorie Battaglini

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)