L04000022942

(Requestor's Name)		
(Address)		
(Address)		
(Cit	y/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
		
(Do	cument Number)	}
Certified Copies	_, _ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600030461456

03/15/04--01081--001 **250.00

OF HAR 15 AM 8: 33

lep

RICKEY L. FARRELL, ATTORNEY AT LAW, P.A.

1595 SE PORT ST. LUCIE BOULEVARD PORT ST. LUCIE, FLORIDA 34952 (772) 335-5455 (772) 337-3485 FAX

March 9, 2004

State of Florida Secretary of State Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

> Florida Sun & Surf Realty Group, L.L.C. and Florida Sun & Surf Investment Group, L.L.C.

Dear Sir or Madam:

Enclosed herewith are an original and one copy of the Articles of Organization and acceptance by Registered Agent for each of the above-referenced new filings. Please file the originals in your offices and certify and return to us a certified copy of each.

I am enclosing a check in the amount of \$250.00 (\$125.00 ea.), which covers the filing fees, certified copy fees and the registered agent designation fees. Thank you for your cooperation in this matter.

Sincerely,

Tiffany N. Gonsalves, CLA

Certified Legal Assistant

Enc.

ARTICLES OF ORGANIZATION

OF

FLORIDA SUN & SURF INVESTMENT GROUP, L.L.C.

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608.407, Florida Statutes, hereby make, acknowledge, and file the following Articles of Organization:

ARTICLE I - NAME

The name of this limited liability company is Florida Sun & Surf Investment Group, L.L.C.

ARTICLE II - DURATION

This limited liability company shall have perpetual existence commencing on the date of this filing of these Articles with the Department of State.

ARTICLE III - ADDRESS

The mailing address and street address of the principal office of the Company shall be 1251 S.E. Ladner Street, Port St. Lucie, Florida 34983.

ARTICLE IV - MANAGEMENT

Management of the Company shall be reserved to the Members. The Managing Member shall be Elizabeth K. Ruvo. The Member(s) of the Company are as follows:

Elizabeth K. Ruvo 1251 S.E. Ladner Street Port St. Lucie, Florida 34983 Richard J. Ruvo 1251 S.E. Ladner Street Port St. Lucie, Florida 34983

Juan Carlos Nanni 214 N.E. Surfside Avenue Port St. Lucie, Florida 34983

Camille C. Nanni 214 N.E. Surfside Avenue Port St. Lucie, Florida 34983

ARTICLE V - ADDITIONAL MEMBERS

Members shall have the right to admit additional members from time to time on such terms and conditions as the Members shall deem advisable and acceptable.

ARTICLE VI -SURVIVORSHIP

In the event any Member or Members shall die, resign, retire, be expelled, be adjudicated bankrupt, or upon the occurrence of any other event which terminates the continued membership of a Member in the Company, the remaining Members shall have the right to continue the business.

ARTICLE VI - REGISTERED AGENT

The street address of the initial registered agent of the Company is Rickey L. Farrell, 1595 SE Port St. Lucie Boulevard, Port St. Lucie, Florida 34952.

Elizabeth K. Kuwa

STATE OF FLORIDA COUNTY OF ST. LUCIE

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Elizabeth K. Ruvo, who has produced FLDRivers victors as identification or who is personally known to me and who executed the foregoing Articles of Organization, and she acknowledged before me that she executed the Articles of Organization.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County above this 10th day of March, 2004. Notary Public State of Florida at Large (SEAL) Printed Signature: Tistany N. Bonsalves Tiffany N. Gonsalves My Commission No: MY COMMISSION # DD261185 EXPIRES November 7, 2007 BONDED THRUTROY FAIN INSURANCE, INC. My Commission Expires:

Richard J. Ruyo, Member

STATE OF FLORIDA COUNTY OF ST. LUCIE

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Richard J. Ruvo, who has produced FL Diver: COXCE as identification or who is personally known to me and who executed the foregoing Articles of Organization, and he acknowledged before me that he executed the Articles of Organization.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County above, this Of day of March, 2004.

(SEAL)

Tittany N. Gonsalves COMMISSION # DDZ61185 EXPIRES November 7, 2007 BONDED THRU TROY FAIN INSURANCE INC.

Notary Public State of Florida at Large

Printed Signature: Tiffany N. Gonsalres My Commission No:

My Commission Expires:

Juan Carlòs Nanni

STATE OF FLORIDA COUNTY OF ST. LUCIE

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Juan Carlos Nanni, who has produced FL DRIVERS LICEUSE as identification or who is personally known to me and who executed the foregoing Articles of Organization, and he acknowledged before me that he executed the Articles of Organization.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County above, this 1044 day of March, 2004.



Notary Public State of Florida at Large Printed Signature: Ti flam, N. Gonsalves

My Commission No: My Commission Expires:

Camille C. Nanni, Member

STATE OF FLORIDA COUNTY OF ST. LUCIE

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Camille C. Nanni, who has produced as identification or who is personally known to me and FL DRIVER WEEN'SE who executed the foregoing Articles of Organization, and she acknowledged before me that she executed the Articles of Organization.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County above, this 10th day of March, 2004.

(SEAL)

Tiffany N. Gonsalves COMMISSION # DD261185 EXPIRES November 7, 2007 ONDED THRUTROY FAIN INSURANCE, INC.

Notary Public State of Florida at Large Printed Signature: TE Cfang W. Gons Lucs

My Commission No:

My Commission Expires:

ACCEPTANCE BY REGISTERED AGENT

Having been named as Registered Agent to accept service of process for the above named company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper performance of my duties. I am familiar with and accept the obligations of such position.

RICKEY L. FARRELL Registered Agent

STATE OF FLORIDA COUNTY OF ST. LUCIE

IN WITNESS WHEREOF, I have set my hand and seal in the State and County above, this 10th day of Meych 2004.

(SEAL)

Tiltarry N. Gonsalves
MY COMMISSION # DD261185 EXPIRES
November 7, 2007
BONDED TREU TROY FAIN INSURANCE, INC.

Notary Public State of Florida at Large

Printed Signature: TIFFAUYU. BOUSALVES

My Commission No:

My Commission Expires:

IS ON OF CORPORA

) }