

L04000057307

07/29/04 12:00

(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



600039477066

07/29/04--01034--025 \*\*160.00



RAQUEL TORRES  
1880 Oakley Ave.  
Fort Myers, FL 33901  
Phone: (239) 887-0824

July 26, 2004  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear People:

The enclosed documentation has been completed to your specifications. Thank you for your assistance.  
Please contact me should you have any questions regarding this request.

Have a great day!

Sincerely,

Raquel Torres

FILED

JUL 29 10 30 AM  
TALLAHASSEE, FL  
FBI

TRANSMITTAL LETTER

FILED

TO: Registration Section  
Division of Corporations

2009 JUN 29 PM 09

SUBJECT: New Moon Investments, 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:

Raquel Torres

(Name of Person)

New Moon Investments, LLC

(Firm/Company)

1880 Oakley Ave.

(Address)

Fort Myers, FL 33901

(City/State and Zip Code)

For further information concerning this matter, please call:

Raquel Torres

(Name of Person)

at ( 239 ) 887-0824

(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**

**FILED**

2011 09 12 09

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

New Moon Investments, 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:**

1880 Oakley Ave.

1880 Oakley Ave.

Ft. Myers, FL 33901

Ft. Myers, FL 33901

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

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

Raquel Torres

Name

1880 Oakley Ave.

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

Ft. Myers, FL 33901

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, Florida Statutes..*

Raquel Torres

Registered Agent's Signature

FILED

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

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

20 JUL 29 P 12:09

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Raquel Torres  
1880 Oakley Ave.  
Ft. Myers, FL 33901

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Raquel Torres  
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.)

Raquel Torres  
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)