105000030713

	. ,	
(Req	uestor's Name)	
(Addı	ress)	
(Add	ress)	- "
(City/	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doct	ument Number)	,
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
		İ
		ŀ





100048741931

##125.00 +#125.00

SECRETA TALLAHAS

MAR 28 PH 2: 32
TETARY OF STATE

U

TRANSMITTAL LETTER

FO: Registration Section Division of Corporations
SUBJECT: 3 Towers Development, 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:
Nir Sharon (Name of Person)
(Firm/Company)
4148 A Corporate Square Blud.
Naples FL 34104 AS ST T
For further information concerning this matter, please call:
Nir Sharon at 239 649-8343 FS (Area Code & Daytime Telephone Number)
(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:
3 Towers Development 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:
4148 A Corporate Sq. Blud. 4148 A Corporate Sq. Blue
Naples, FL 34104 Naples, FL 34104
TASE 05
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:
Nir Sharon
H148 A Corporate Sq. Blud Florida street address (P.O. Box NO Dacceptable)
Naples, FLORIDA 34104 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..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

The name and address of each Manager	or Managing Member is as follows:	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
President	Nir Sharon 4148 A Corporate Square Blud. Naples FL 34104	
Vice President	Amir Sharow 4148 A Corporate Square Blud. Naples, FL 34104	
Secretary	Tapir Inal 4148 A Corporate Square Blud Naples FC 34104	·
(Use attachment if necessary)		
NOTE: An additional article must be	added if an effective date is requested.	
REQUIRED SIGNATURE:	OS MAR : SECRETA ALLAHAS	-17
Signature of a member or an a	uthorized representative of a member.	
(In accordance with section 608, of this document constitutes an a that the facts stated herein are tro	408(3), Florida Statutes, the execution uffirmation under the penalties of perjury u.e.)	
Nir Sharov Typed or pri	inted name of signee	-

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

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)