

L05000041921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

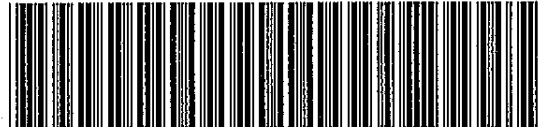
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TALLAHASSEE, FLORIDA

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05 APR 28 PM 1:03

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 341880 148904A

AUTHORIZATION :

COST LIMIT : \$ 125.00

FILED
05 APR 28 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : April 28, 2005

ORDER TIME : 10:57 AM

ORDER NO. : 341880-005

CUSTOMER NO: 148904A

CUSTOMER: Mr Mark Tannen
Tannen Reeber & Associates,
Inc.
2776 University Drive

Coral Springs, FL 33065-5100

DOMESTIC FILING

NAME: L2V DEVELOPMENT LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS: _____

FROM :

FAX NO. :

Apr. 27 2005 06:12PM P3

Apr. 26 05 03:36p

Larry Scapacchi

850-492-6738

p.2

FROM :

FAX NO. :

Apr. 25 2005 04:37PM

FILED
05 APR 28 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

L2V Development LLC

ARTICLE II - Address:

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

Principal Office Address:

12680 PRIMERO COURT
PENSACOLA, FL 32507

Mailing Address:

12680 PRIMERO COURT
PENSACOLA, FL 32507

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

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

Lawrence Scapacchi

Name

12680 Primo Court

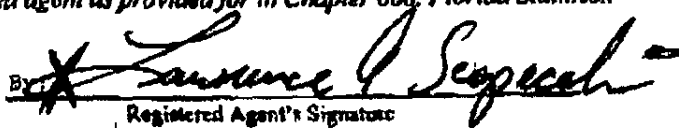
Florida street address (P.O. Box **NOT** acceptable)

Pensacola

FLORIDA 32507

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.

By: 

Registered Agent's Signature

FROM :

FAX NO. :

Apr. 27 2005 06:13PM P4

APR 27 05 03:00p

Larry Scapeocchi

850-492-8738

P. 3

FROM :

FAX NO. :

Apr. 25 2005 04:37PM P4

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

Lawrence Scapeocchi

12680 Primero Court

Pensacola, FL 32507

MGRM

Victor Scapeocchi

10064 NW 48th Court

Coral Springs, FL 33076

MGRM

Vincent Scapeocchi

716 NW 126th Avenue

Coral Springs, FL 33071

(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(1), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

By: Lawrence Scapeocchi

Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 10.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)