

LO5000048294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

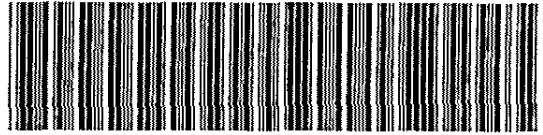
(Business Entity Name)

(Document Number)

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05/09/05--01047--007 \*\*130.00

05 MAY -9 PM 2:21  
TALLahassee FLORIDA

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BIG APPLE 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:

IMER DEDJA  
(Name of Person)

c/o BIG APPLE LLC  
(Firm/Company)

780 HAMPTON CIRCLE  
(Address)

NAPLES FL 34105  
(City/State and Zip Code)

For further information concerning this matter, please call:

IMER DEDJA at ( 609 ) 330-8449  
(Name of Person) (Area Code & Daytime Telephone Number)

05 MAY -9 PM 2:21  
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**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:

BIG APPLE 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:**

780 HAMPTON CIRCLE  
NAPLES FL 34105

780 HAMPTON CIRCLE  
NAPLES FL 34105

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

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

IMER DEDJA

Name

780 HAMPTON CIRCLE

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


NAPLES FL 34105

FL

City, State, and Zip

FILED  
CLERK OF CIRCUIT COURT  
IN AND FOR THE COUNTY OF  
SANTA LUCIA  
FLORIDA  
05/11/21 9:11 AM '21

*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, F.S..*

  
\_\_\_\_\_  
Registered Agent's Signature

(CONTINUED)

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

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

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager "MGRM" = Managing Member	
MGR	Imer Dedja 780 Hampton Circle Naples Fl 34105
MGRM	Muhim Kosovrasti 780 Hampton Circle Naples Fl 34105
MGRM	Bekim Kosovrasti 780 Hampton Circle Naples Fl 34105

(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.)

Imer Dedja

Typed or printed name of signee

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

FILED  
05/11/11 -9 PM 3:21  
CLERK OF CIRCUIT COURT  
IN AND FOR THE COUNTY OF NAPA, FLORIDA