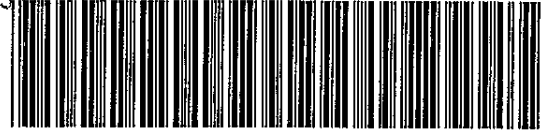


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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07/01/05--01024--002 **160.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 5, 2005

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Subject: Florida Limited Liability Company

Applicant: Christopher M. Iannucci
Company: Christopher M. Iannucci, L.L.C.
Address: 512 Carpenter Road
Orlando, Florida 32833
Telephone: 407.641.1303

Dear Sir/Madam:

I am submitting for the following documents to be processed along with a check in the amount \$160.00.

- Transmittal Letter
- Articles of Organization For Florida Limited Liability Company

Should you have any questions, please do not hesitate to contact me at 407.641.1303
Thank you for your assistance with this request.

Sincerely,

Christopher M. Iannucci
Enclosures



TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

2005 JUL -1 P 3: 54

SUBJECT: CHRISTOPHER M. IANNUCCI, L.L.C.
(Name of Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHRISTOPHER M. IANNUCCI

(Name of Person)

CHRISTOPHER M. IANNUCCI, L.L.C.

(Firm/Company)

512 CARPENTER ROAD

(Address)

ORLANDO, FLORIDA 32833

(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher M. Iannucci

(Name of Person)

at (407) 641.1303

(Area Code & Daytime Telephone Number)

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CHRISTOPHER M. IANNUCCI, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

512 CARPENTER ROAD
ORLANDO, FLORIDA 32833

Mailing Address:

512 CARPENTER ROAD
ORLANDO, FLORIDA 32833

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

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

CHRISTOPHER M. IANNUCCI

Name

512 CARPENTER ROAD

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

ORLANDO FL 32833

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, 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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

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MGR

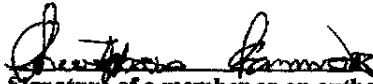
CHRISTOPHER M. IANNUCCI

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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.)

CHRISTOPHER M. IANNUCCI

Typed or printed name of signer

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)