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	*
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of St	atus
Special Instructions to Filing Officer:	

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Grande Livining Condo, LLC		
	Liability Company)	
The enclosed Articles of Organization and fee(s) are su	bmitted for filing.	فہ ن
Please return all correspondence concerning this matter	r to the following:	
Frank Guerrieri		
(N	Iame of Person)	Masser, Fromba
Grande Living Condo, LLC		9 7
(F	Firm/Company)	
1220 Danbury Avenue		
	(Address)	
Davie, FL 33325	State and Zip Code)	
(0.9.		
For further information concerning this matter, please of	call:	
Frank Guerrieri	at (954) 473-5272	
(Name of Person)	(Area Code & Daytime To	elephone 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	MAILING A Registration S Division of C	Section

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLE I - Name: The name of the Limited Liability Company is:	
The name of the Limited Liability Company is:	2 C (
The hand of the Diffined Educativy Company to.	
Grande Living Condo, LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Co	ompany is:
Principal Office Address: Mailing Address:	
1220 Danbury Avenue 1220 Danbury Avenue	_
Davie, FL 33325 Davie, FL 33325	_
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature. The name and the Florida street address of the registered agent are:	re:
Daniel Guerrieri	
Name	
1220 Danbury Avenue	
Florida street address (P.O. Box NOT acceptable)	
Davie, FL 33325 FL 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..

Anniel Guerrica 8/1/05
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:		
MGRM	Daniel Guerrieri 1220 Danbury Avenue		
	Davie, FL 33325		
MGRM	Frank Guerrieri 14340 Arlington Place		
MGRM	Davie, FL 33325 Anthony Siravo		
	14300 Arlington Place Davie, FL 33325		
- -	76		
(Use attachment if necessary)			
NOTE: An additional article must be added if an effective date is requested.			
REQUIRED SIGNATURE:			
Signature of a member of	Secondary 8/1/05 an authorized representative of a member.		
	n 608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n are true.)		
Frank Guerrieri 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)