L06000009797

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
f 1/4
1 1 \
)



000064272230

THE PH 2: 57
206 JAN 27 PH 2: 57
EECHTASSEE, FLORIGA





R SERTICE COMPANI
ACCOUNT NO.: 072100000032
REFERENCE: 837281 5490A
AUTHORIZATION: Spulle was
COST LIMIT: \$ 130.00
ORDER DATE : January 27, 2006
ORDER TIME : 11:51 AM
ORDER NO. : 837281-005
CUSTOMER NO: 5490A
DOMESTIC FILING
NAME: MASTRIANA DEVELOPMENT, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Carina L. Dunlap - EXT. 2951
EXAMINER'S INITIALS:

A

	·	
	یئر د	
	FOR FLORIDA LIMITED LIABILITY COMPANY ompany is:	
RICLES OF ORGANIZATION	FOR FLORIDA LIMITED LIABILITY COMPANY	
A TOMORY OF THE YEAR	TOP OF C	
ARTICLE I - Name:		
The name of the Limited Liability Co	ompany is:	
	92	
Mastriana Development, LLC	The second secon	
Must end with the words "Limited Liability Con	npany, "Limited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address:		
The mailing address and street addre	ss of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
Tincipal Office Address.	Training Auditess.	
1500 North Federal Highway	1500 North Federal Highway	
Suite 200	Suite 200	
Fort Lauderdale, Florida 33304	Fort Lauderdale, Florida 33304	
	Registered Office, & Registered Agent's Signature:	
(The Limited Liability Company cannot serve as business entity with an active Florida registrati	s its own Registered Agent. You must designate an individual or another	
business tunity with an active Provide regional	, , , , , , , , , , , , , , , , , , ,	
The name and the Florida street add	ress of the registered agent are:	
F. Ronald Mastrian	•	
F. Rolland Mashinan	Name	
	Manie	
1500 North Federal	Highway Suite 200	
Flo	rida street address (P.O. Box NOT acceptable)	
Fort Lauderdale	FT 33304	
	City, State, and Zip	
	ψ·· · · · · · · · · · · · · · · · · · ·	

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 (REQUIRED)

(CONTINUED) Page 1 of 2

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

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

MGMR	F. Ronald Mastriana
	1500 North Federal Highway Suite 200
	Fort Lauderdale, Florida 33304
Member	Brien Mastriana
	1500 North Federal Highway Suite 200
	Fort Lauderdale, Florida 33304
Member	Alexandra Mastriana
	1500 North Federal Highway Suite 200
	Fort Lauderdale, Florida 33304
Use attachment if necessary)	
Charles words in the control of	January 20, 2006
	an the date of filing: January 20, 2006 (OPTIO) nust be specific and cannot be more than five business of

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.)

By: F. Ronald Mastriana

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)