## W4000032856

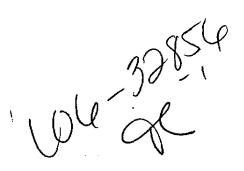
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 21, 2006

SAL BAZAZ 501 GOODLETTE ROAD NORTH BLDG. D-100 NAPLES, FL 34102

SUBJECT: SAL BAZAZ PA LLC Ref. Number: W06000013526

We have received your document for SAL BAZAZ PA LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "PA." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 806A00019170



(239) 643-1250 Fax (239) 643-1285 501 Goodlette Road North Hdg D-100 Naples, FL 34102

March 13, 2006

Registration Section **Division of Corporations** PO Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Enclosed, please find my articles of organization along with a check for \$160.00. I can be reached at 181 3<sup>rd</sup> Street NW, Naples, Fl 34120, or at 239-455-1311.

Thank you very much for your cooperation.

Sincerely,

Sal Bazaz, Esq.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company	is:
Sal Bazaz - LLC (Must end with the words "Limited Liability Company, "L	imited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
181 3rd st NW Napies Fl 34120	181 3m st NW Naples F1 24120
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
The name and the Florida street address of the	he registered agent are:
Na Na	ime ?
181 3rd St Florida street	MW (P.O. Box NOT acceptable)
Naples City, Sta	FL 34120 Ite, 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 (REOUIRED

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Manager of the name and address of each Manager of the name and address of t	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Sal Bazaz 181 3rd St NIU Naples Fl 34120
·	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	e of filing: (OPTIONAL) ecific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member.
(In accordance with section	608.408(3), Florida Statutes, the execution

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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)

that the facts stated herein are true.)

Page 2 of 2

of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee