60000 51833

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	dv



400074003814

05/10/06--01013--001 **125.00

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Igloo			
	(Name of Limite	d Liability Company)	
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	condence concerning this matte	r to the following:	
Salvatore	e Catalano		
	()	Name of Person)	
Igloo Rea	alty LLC		
	(Firm/Company)	
Post Offi	ce Box 1712	<u>.</u>	
- 1		(Address)	
Eustis, F	lorida 32727-17	712	•
, <u> </u>	(City,	State and Zip Code)	
For further information	concerning this matter, please	cail:	
Salvatore Cata	alano	at (352) 636.84	
(Name	e of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for	or 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)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Igloo Realty L (Must end with the w		Company, "Limited Company" or their abbreviation "LLC," or	L.C.,")
ARTICLE II -	Address:		
		lress of the principal office of the Limited Liabil	ity Company is:
Principal Office	e Address:	Mailing Address:	
1503 Washington	n Avenue	Post Office Box 1712	
Eustis, Florida 3	2726	Eustis, Florida 32727-1712	
The Limited Liability	y Company cannot serve	t, Registered Office, & Registered Agent's Signar as its own Registered Agent. You must designate an individual	gnature: or another
The Limited Liability business entity with	y Company cannot serve an active Florida registra	as its own Registered Agent. You must designate an individual	or another
The Limited Liability business entity with	y Company cannot serve an active Florida registra	as its own Registered Agent. You must designate an individual ation.) dress of the registered agent are:	or another
The Limited Liability business entity with	y Company cannot serve an active Florida registra ne Florida street ad	as its own Registered Agent. You must designate an individual ation.) dress of the registered agent are:	or another
The Limited Liability business entity with	y Company cannot serve an active Florida registra ne Florida street ad Salvatore Cat	as its own Registered Agent. You must designate an individual ation.) dress of the registered agent are: talano	or another SIV-50 A C
The Limited Liability business entity with	y Company cannot serve an active Florida street added Salvatore Cate 1503 Washir	as its own Registered Agent. You must designate an individual ation.) Idress of the registered agent are: talano Name	or another SIV-50 A C
The Limited Liability business entity with	y Company cannot serve an active Florida street added Salvatore Cate 1503 Washir	as its own Registered Agent. You must designate an individual ation.) Idress of the registered agent are: talano Name ngton Avenue	or another

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..

Salvatore Catalano 05-07-2006
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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR Salvatore Catalano Post Office Box 1712 Eustis, Florida 32727-1712 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:**

Typed or printed name of signee

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

Filing Fees:

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

Salvatore Catalano

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2

06 MAY 10 AHII: 36