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OB OCT 17 PM 2: 43 SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: BELACREMA, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

John I. Middaugh Attorney at Law 4100 Corporate Square, Ste. 152 Naples, FL 34104

For further information concerning this matter, please call:

John I. Middaugh at (239) 263-3100

Enclosed is a check for the following amount:

\$125.00 Filing Fee

x \$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)

or

STREET/COURIER ADDRESS:

Florida Department of State Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 (850) 245-6051 <u>MAILING ADDRESS:</u>

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 (850) 245-6051

ARTICLES OF ORGANIZATION

FOR

FLORIDA LIMITED LIABILITY COMPANY BELACREMA, LLC

Pursuant to Section 608.407, Florida Statutes, the following is set forth:

<u>ARTICLE I – NAME</u>

The name of the Limited Liability Company is BELACREMA, LLC.

ARTICLE II - ADDRESS

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

BELACREMA, LLC 254 Banyan Blvd., Ste 254 Naples, FL 34102

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

Name: Helen M. Noble

Address: 254 Banyan Blvd., Ste. 254

Naples, FL 34102

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, Florida Statutes.

Registered Agent's Signature

FILED

<u>ARTICLE IV – MANAGER(S)</u> or MANAGING MEMBER(S)

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

<u>Title</u> <u>Name and Address</u>

MGRM HMN, LLC

254 Banyan Blvd., Ste. 254

Naples, FL 34102

<u>ARTICLE V – COMMENCEMENT OF EXISTENCE</u>

This Limited Liability Company shall be deemed to commence its existence when these Articles are filed with the Florida Department of State.

ARTICLE VI – BUSINESS PURPOSE

The purpose of the Limited Liability Company is to engage in any lawful act or activity for which a Limited Liability Company may be formed under the Limited Liability statutes of the State of Florida.

<u>ARTICLE VII – DURATION</u>

The Limited Liability Company shall have a perpetual existence.

ARTICLE IX - MEMBERS LIMITED LIABILITY

The liability of the members shall be limited as provided under the laws of the Florida Limited Liability statutes.

ARTICLE X - MANAGER(S) & MEMBER(S) AS AGENTS

No persons other than the Manager and Managing Member(s) are agents of the Limited Liability Company or have the authority to make any contracts, enter into any transactions, or make any commitments on behalf of the Limited Liability Company, each of whom, individually shall have the authority. No member shall be an agent of any other member of the Limited Liability Company solely by reason of being a member.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization at Collier County, Florida on this 13th day of October, 2006. 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.

HMN, LLC

By:

Helen M. Noble, Managing Member

Subscribed, sworn to, and acknowledged before me by HELEN M. NOBLE, as Managing Member for HMN, LLC, who has produced a driver's license or identification card issued by a state or territory of the United States as identification, this 13th day of October, 2006.

Votary Public for Florida

(Seal)

rectary record for records

My Commission Expires:

JOHN I. MIDDAUGH
MY COMMISSION # DD 190480
EXPIRES: April 6, 2007
Bonded Thru Notary Public Underwriters

FILED

06 OCT 17 PH 2: 43

SECRETARY OF STATE
AHASSEE, FLORID