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(Re	equestor's Name)	
(Ac	ldress)	
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(Cil	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Division of Corporations	
SUBJECT: BAYSIDE CONSTRUCTION, LLC	
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
ROGER H. FINE	
(Name of Person)	
BAYSIDE CONSTRUCTION, LLC	
(Firm/Company)	
P.O. BOX 11448	
(Address)	
NAPLES, FL. 34101	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
ROGER H. FINE at (239) 513-9833	
ROGER H. FINE at (239) 513-9833 (Area Code & Daytime Telephone	e Number)
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy is enclosed)	1160.00 Filing Fee, ificate of Status & tified Copy tional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compan	y is:
-	
BAYSIDE CONSTRUCTION, LLC	
Must end with the words "Limited Liability Company,"	Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
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The maining address and street address of the	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2828 CRAYTON RD.	P.O. BOX 11448
NAPLES, FL. 34103	NAPLES, FL. 34101
ARTICLE III - Registered Agent, Regist The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of	the registered agent are:
ROGER H. FINE	

Name

2828 CRAYTON RD.

Florida street address (P.O. Box NOT acceptable)

NAPLES, FL.

FL 34103

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2 SECRETARY OF STATE DIVISION OF CORPORATIONS

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 MGRM ROGER H. FINE P.O. BOX 1448 NAPLES, FL. 34101 MGR CHRISTOPHER AMORE 7980 WESTFIELD BLVD. INDIANAPOLIS, IN. 46240

(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:

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.)

ROGER H. FINE

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)