

LOT00042937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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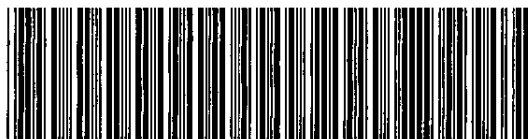
Special Instructions to Filing Officer:

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EFFECTIVE DATE

4-24-07



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04/16/07--01041--012 \*\*125.00

W07-18686

FILED  
07 APR 23 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WATER VIEW FRONT 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:

MARK A. SPEZIO

(Name of Person)

(Firm/Company)

1601 KELLY AVE.

(Address)

CREST HILL, IL 60403

(City/State and Zip Code)

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TALLAHASSEE FLORIDA

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For further information concerning this matter, please call:

MARK A. SPEZIO

(Name of Person)

at (815) 260-9775

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 17, 2007

MARK A. SPIEZIO  
1601 KELLY AVE  
CRESTHILL, IL 60403

SUBJECT: WATER VIEW FRONT LLC  
Ref. Number: W07000018686

07 APR 23 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

We have received your document for WATER VIEW FRONT LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on April 16, 2007. Please amend your document 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) 245-6949.

RUSSELL L HUNT  
Document Specialist

Letter Number: 507A00025775

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

WATER VIEW FRONT LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

## ARTICLE II - Address:

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

Principal Office Address:

1601 KELLY AVE  
CREST HILL, FL 32823

Mailing Address:

SAME

## ARTICLE III - Registered Agent, Registered Office, &amp; Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

THOMAS J. BUEHLER  
Name

14540 HICKORY HILL CT. #11025  
Florida street address (P.O. Box **NOT** acceptable)

FORT MYERS FL 33912  
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.

Thomas J. Buehler  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TAMMISSEE FLORIDA

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**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

Name and Address:MGRMMARK A. SPIEZIO  
1601 KELLY AVE.  
CREST HILL, IL 60403MGRMJohn S. Dillon  
205 W. RAYMOND  
SOLIST, IL 60435

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 4-24-07 (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:

Mark A. Spiezio John S. Dillon  
 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.)

EFFECTIVE DATE

4-24-07

MARK A. SPIEZIO John S. Dillon  
 Typed or printed name of signer

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)