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EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations						
CVID I	CT. Fuentes First Class Rea	iltv.	LLC				
SUBJE	(Name of Limi			ny)	11 a .		
The en	closed Articles of Organization and fee(s) are	subm	itted for filing	ζ.			
Please	return all correspondence concerning this may	iter to	the following	:			
	Florence Ann Fuentes						
		(Nam	e of Person)				
	Fuentes First Class Realty,	LLC					
	•	(Firm	n/Company)				
	5511 Lake Leta Blvd						
		(/	Address)			_	
	Tampa, FL 33624	•					
	(Ci	ty/Stat	e and Zip Code	)			
For fur	ther information concerning this matter, pleas	e call	:				
Flore	ence Ann Fuentes	at (	813	523-6	139	ZOOR SEC TALL	
	(Name of Person)	`	(Area Code	& Daytime	Telephone Number)	SECRETA	T
Enclos	ed is a check for the following amount:		,			19 SEE	
<b>□</b> \$125.	00 Filing Fee \$\sum \square \\$130.00 Filing Fee & Certificate of Status		6155.00 Filin Certified Cop (additional copy	ру	\$160.00 Fili Certificate of Certified Co (additional co	Status &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registrati Division Clifton B 2661 Exe	ourier Addr on Section of Corporat suilding ecutive Cent see, FL 3230	ions er Circle	•	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company	is:		
Fuentes First Class Realty, LLC.	ability Company, "L.L.C.," or "LLC.")		
(Musi end with the words Limited Lia	ability Company, L.L.C., or LLC.		
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability	y Compan	y is:
Principal Office Address:	Mailing Address:		
5511 Lake Leta Blvd	5511 Lake Leta Blvd		
Гатра, FL 33624	Tampa, FL 33624		
ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own Re business entity with an active Florida registration.)  The name and the Florida street address of the	egistered Agent. You must designate an individual and individual a	2008 HAR II	1
Florence Ann Fuer	ntes me	Y PH	m
5511 Lake Leta Bl	vd address (P.O. Box NOT acceptable)	9 PM 1: 01	O
City, Stat	te, 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 (REOLIRED)

(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:

"MGR" = Mana; "MGRM" = Mar				
MGRM	gg	Florence Ann Fuentes		
MON	<del>-</del>	5511 Lake Leta Blvd		
		Tampa, FL 33624		•
MOD		Annala Frantsa		
MGR	<del></del>	Angelo Fuentes  5511 Lake Leta Blvd		
		Tampa, FL 33624		
				•
	<del></del>			
(Use attachment	if nacessary)			•
(Use attachment	if necessary)			
	•	date of filing:	(OPTIO	NAL
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)