

L08000069826

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000177272 3)))



H080001772723ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

RECEIVED
08 JUL 21 PM 2:35
2008 JUL 21 A 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Villa Fratelli, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

A. LUNT
JUL 22 2008
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

H-08000177272-3

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608 and/or 621, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

VILLA FRATELLI, LLC

ARTICLE II ADDRESS

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

1413-KASS CIRCLE
SPRING HILL, FLORIDA 34606

2008 JUL 21 A 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


FILED

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

NICKY J SANTACROCE
14520 TAREVES DRIVE
HUDSON, FLORIDA

Having been named as registered agent 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.

X 

NICKY J SANTACROCE / Registered Agent's signature

H-08000177272-3

PAGE 2

VILLA FRATELLI, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

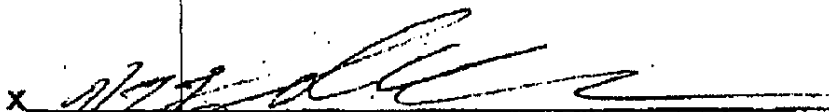
ARTICLE V MEMBERS (optional)

MANAGING MEMBER
NICKY J SANTACROCE
1413-KASS CIRCLE
SPRING HILL, FLORIDA 34606

MANAGING MEMBER
JOSEPHINE A SANTACROCE
1413-KASS CIRCLE
SPRING HILL, FLORIDA 34606

2008 JUL 21 A 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

.....


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.

NICKY J SANTACROCE