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D. BRUCE

AUG 18 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 380 CENTRAL AVENUE 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:	
ARTHUR L. CANADA	
(Name of Person) 380 CENTRAL AVENUE LLC	
(Firm/Company)	
350 5TH AVENUE S. STE 202	
(Address)	
NAPLES, FL 34102	
(City/State and Zip Code)	
(City/State and Zip Code) For further information concerning this matter, please call:	I
ARTHUR L. CANADA at 239 821-8998 (cellular)	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \text{Certificate of Status} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{(additional copy is enclosed)}	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	
ASTROPH CANADA 288 82 F983 (cellular)	
Programme and entire the management of the same and the s	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company	is:	
380 CENTRAL AVENUE LLC		
(Must end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Limited Liability Compa	ny is:
Principal Office Address:	Mailing Address:	
350 5TH AVENUE S. STE 202	SAME	
NAPLES, FL 34102		
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another	80
The name and the Florida street address of the	ne registered agent are:	ON AUG
ARTHUR L. CANA	ADA SSA	
Na	me me	
350 5TH AVENUE	E S. STE 202	
NAPLES,	34102	:7

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.

 \Diamond

Registered Agent's Signature (REQUIRED)

City, State, and Zip

(CONTINUED) Page 1 of 2

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
was in the and	ARTHUR L. CANADA
119870	350 5TH AVENUE S, STE 202
	NAPLES, FL 34102
4/0	TATILLES, TE STIVE
MGRM // (2 mg/s)	MARGUERITE A. CANADA
- Nigrada	350 5TH AVENUE S. STE 202
	NAPLES, FL 34102
MGRN AG	TAYLOR W. CANADA
	350 5TH AVENUE S. STE 202
,	NAPLES, FL 34102
(Use attachment if necessary)	
CLE V: Effective date, if other than t	
CLE V: Effective date, if other than t	
CLE V: Effective date, if other than teffective date is listed, the date must	
CLE V: Effective date, if other than teffective date is listed, the date must 0 days after the date of filing.)	
CLE V: Effective date, if other than the effective date is listed, the date must of days after the date of filing.) REQUIRED SIGNATURE:	t be specific and cannot be more than five business days pri
CLE V: Effective date, if other than the effective date is listed, the date must of days after the date of filing.) REQUIRED SIGNATURE:	t be specific and cannot be more than five business days pri
CLE V: Effective date, if other than the effective date is listed, the date must of days after the date of filing.) REOUIRED SIGNATURE: Signature of a men (In accordance with of this document co	t be specific and cannot be more than five business days pri
CLE V: Effective date, if other than the effective date is listed, the date must of days after the date of filing.) REQUIRED SIGNATURE: Signature of a men (In accordance with of this document co	nber or an authorized representative of a member on section 608.408(3), Florida Statutes, the execution on stitutes an affirmation under the penalties of pertury and herein are true.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ARTICLE IV- Manager(s) or Managing Member(s):

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

\$ 30.00 Certified Copy (Optional)

Filing Fees:

\$ 5.00 Certificate of Status (Optional)

(2)