

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.

(((H09000125130 3)))



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 : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335

Phone

: (305)599-0839

Fax Number

: (305)716-0346

FLORIDA/FOREIGN LIMITED LIABILITY CO.

ARTAMORADA, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

D. BRUCE

MAY 2 0 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ΔΡΤΛΜΟ	RADA, LLC	
(Must end with the words "Limited	Liability Company," "LL.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company	is:
Principal Office Address:	Mailing Address:	
86700 OVERSEAS HIGHWAY ISLAMORADA, FL 33036	86700 OVERSEAS HIGHWAY ISLAMORADA, EL 33036	•
	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another.	ж 1
(The Limited Liability Company connot serve as its own business emity with an active Florida registration.)	Registered Agent. You must designate an individual or another /	09 MAY
(The Limited Liability Company cannot serve as its own business emity with an active Florida registration.) The name and the Florida street address of	Registered Ageni. You must designate an individual or another // Communication of the registered agent are:	61 AVH 60
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of JAN	Registered Agent. You must designate an individual or another // the registered agent are:	MAY 19
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of JAN	Registered Agent. You must designate an individual or another?	MAY 19 AM
(The Limited Liability Company granted serve as its own business emity with an active Florida registration.) The name and the Florida street address of JAN 86700 OVE	Registered Agent. You must designate an individual or another? The registered agent are: SET DOTO Name RSEAS HIGHWAY F (P.O. Box NOT acceptable)	MAY 19 AM 8:5
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of JAN 86700 OVE	Registered Agent. You must designate an individual or another of the registered agent are: SET DOTO Name RSEAS HIGHWAY (P.O. Box NOT acceptable)	MAY 19 AM 8:

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

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:		
"MGR" = Mana			
"MGRM" = Ma	naging Member		
MGR	JANET DOTO		
	86700 OVERSEAS HIGHWAY	<u></u>	
	ISLAMORADA_FL.33036	p	
MGRM	MORNA STRONGHOLT	_	
	86700 OVERSEAS HIGHWAY	·	
	ISLAMORADA, EL 33036	-	
MGRM	CAROLYN SMITH		
	86700 OVERSEAS HIGHWAY	<u> </u>	
	ISLAMORADA, FL 33036		
11.			
MGRM"	ANN MARIE ANDERSON	_	
•	86700 OVERSEAS HIGHWAY		
	JSLAMORADA, EL 33036	_	
(Use attachment	if necessary)		
ARTICLE V: Effective	date, if other than the date of filing: (OPT)	(ONAL)	
(If an effective date is his	sted, the date must be specific and cannot be more than five busines	s days prio	Γ
to or 90 days after the d	late of filing.)	4	
REOURED SI	GNATURE:	<u>Σ</u> ω ο	
	Gnet & Dato	O9 MAY SECRET	فطسم
	Signification of a member or an authorized representative of a member.		
		19 AM	
	JANET DOTO	ST/ST/ST/ST/ST/ST/ST/ST/ST/ST/ST/ST/ST/S	
•	Typed or printed name of signee	24 ഗ	
	· · · · · · · · · · · · · · · · · · ·	>m 00	

CONTINUATION OF ARTICLES OR ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTAMORADA, LLC

2 ADDITIONAL MANAGERS:

TITLE:

NAME AND ADDRESS:

MGRM

PAM GODE 86700 OVERSEAS HIGHWAY ISLAMORADA, FL 33036

FILED

O9 MAY 19 AM 8: 58

SECRETARY OF STATE

. 4 ;