W9000084518

(Requestor's Name)	
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TALLAHASSEE, FLORIDA

M. THOMAS

SEP - 2 2009

EXAMINER

COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	La Tropicana del Sol, LLC		
SUBULC	Name of Limited Liability Company		
The enclo	osed Articles of Organization and fee(s) are submitted for filing.		
Please ret	um all correspondence concerning this matter to the following:		
_	Patricia Fields Anderson, Esq.		
	Name of Person		
	Anderson & Brodersen, P.A.		
	Firm/Company		
7116 Gulf Blvd, Ste D			
Address			
	St Pete Beach, FL 33706		
	City/State and Zip Code		
	pat_anderfl@yahoo.com E-mail address: (to be used for future annual report notification)		
For furth	er information concerning this matter, please call:		
	Pat Andersonat (727) 363-6100		
	Name of Person Area Code & Daytime Telephone Number		
Enclose	d is a check for the following amount:		
∄\$125.00	Filing Fee \$\int_\$\$130.00 Filing Fee & \$\int_\$\$\$ \$155.00 Filing Fee & \$\int_\$\$ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle		

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 28, 2009

PATRICIA FIELDS ANDERSON, ESQ 7116 GULF BLVD. STE D ST PETE BEACH, FL 33706

SUBJECT: LA TROPICANA DEL SOL, LLC

Ref. Number: W09000038941

We have received your document for LA TROPICANA DEL SOL, 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):

The designation of the registered agent must be at a Florida street address.

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 (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 709A00029009

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lial	pility Company is:			-
(Must end with the	Tropicana del Sol, LLC e words "Limited Liability Company," "	'L.L.C.," or "LLC.")		
ARTICLE II - Address:	et address of the principal offic		Company i	is:
Principal Office Address:	Mailing A	ddress:		
5706 Main Street New Port Richey, FL 3465		cess Drive FL 33556		
(The Limited Liability Company cannot business entity with an active Florida The name and the Florida stre	Agent, Registered Office, & For serve as its own Registered Agent. You registration.) Seet address of the registered agent address of the registered agent Patricia Fields Anderson, Espanse	ent are:	other 2009 SI	TI =
	7116 Gulf Blvd, Ste D	Y OF CO	——————————————————————————————————————	
	da street address (P.O. Box NOT accorded Pete Beach FL State, and Zip	STATE LORIDA	AM 8: 38	* Sand
liability company at the pl registered agent and agree to statutes relating to the prop accept the obligations of t	tered agent and to accept service ace designated in this certificate act in this capacity. I further ager and complete performance of my position as registered agent of the stered Agent's Signature (REQUIRE	e, I hereby accept the appoingree to comply with the proving fragments, and I am familiangs provided for in Chapter 6	ntment as visions of a r with and	all

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:				
C.C. Services of Nevada, Inc.	P.O. Box 320509 Tampa, FL 33679-2509				
Anderson & Brodersen, PA	7116 Gulf Blvd Ste D St Pete Beach, FL 33706				
	DIT EIE BEAUT, I L 33700				
(Use attachment if necessary)	T CARETA SEP-				
ARTICLE V: Effective date, if other than the office of the first state of the date must be or 90 days after the date of filing.)	specific and cannot be more than five laysings days prior				
REQUIRED SIGNATURE:	Salale 3				
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.)

Anderson & Brodersen, PA by Patricia Fields Anderso

Typed or printed name of signee

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)