# 109000117863

(Ře	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	<del>e</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	·

Office Use Only



800163389828

12/10/03--01003--009 \*\*130.00

O9 DEC 10 AM II: 17
SECRETARY OF STATE
ALLAHASSEE, FI DBID.

D. BRUCE

DEC 11 2009

EXAMINER

# **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	ECT: Elite Kitchens & Bath, LLC. Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Denis Destefano Name of Person
	Elite Kitchens + Bath, L.L.C.
	2151 S. Alt Al A. Ste 1200
	Jupiter FL 33477 City/State and Zip Code  ddestefano @ elite companies. net  E-mail address: (to be used for future annual report notification)
-	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	Denis Deste Fano at 501 644-9044  Name of Person Area Code & Daytime Telephone Number
Enclos	ed is a check for the following amount:
]\$125.	O0 Filing Fee \$\sum_{\text{\$130.00}}\siling Fee & \sum_{\text{\$155.00}}\siling Fee & \sum_{\text{\$160.00}}\siling Fee & \centrificate of Status & Certified Copy (additional copy is enclosed)}  Certified Copy (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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Elite Kitchens + Bath, L.L.C.	,
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Comp	oany is:
Principal Office Address: Mailing Address:	
Jupiter, FL 33477	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	PO DEC
Denis Destefano	C 10
Name M~	4
311 Ennis Lane 70	
Florida street address (P.O. Box NOT acceptable)	
City, State, and Zip	7
City, State, and Zip	
Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointme	

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" = Manager "MGRM" = Managing Member	
	0 . 0 . 1 . 0
MGR	<u>Denis Dotefano</u> 311 Ennis Lane
	Jupiter, FL 3345 8
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the	ne date of filing: (OPTIONAL)
(If an effective date is listed, the date must to or 90 days after the date of filing.)	be specific and cannot be more than five business days prior $\frac{1}{2}$
_	
REQUIRED SIGNATURE	AND ENT
	SSE
Signature of a mem	
(In accordance with s	section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury
that the facts stated h	nerein are true.)
Denis	Destefano Typed or printed name of signee
Filing Fees:	Typed or printed name of signee

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)