# W9000122650

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
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M. THOMAS

DEC **2 9** 2009

EXAMINER

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Fior da Houses Proper by Mame of Limited Liability Company	acajeunent, C
<b>'</b>	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Bodo HeGer	
Name of Person	•
Firm/Company	
8910 Tropical Court	Zen SE
	ZECRETA
Fort Myers Fl. 33908 City/State and Zip Code	C 28 C 28 ASS
Boolo 8 123 Gpe. Com	m e
E-mail address: (to be used for future annual report notification)	AM IO: 39 OF S ATE OF LORID
For further information concerning this matter, please call:	99 DA (
3000 KleGer at 279, 850-2	108
Name of Person Area Code & Daytime Telephone	Number
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate Copy (additional copy is enclosed)	0.00 Filing Fee, tificate of Status & tified Copy itional 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:	
Florida Homes Property (Must end with the words "Limited Liabile	
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1405 SE 47th ST #1	1405 SE 47th ST #1
Cape Coral Fl. 33904	Cape Coral Fl. 33904
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an individual or mother &
The name and the Florida street address of the r	egistered agent are:
Bodo KI	eber OR 39
Name	, J. 1.
1405 SE 47	th ST #1
Florida street address (P.O.	Box NOT acceptable)
Cape Coral FL 33904	FL
City, State, as	nd Zip

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Mem	Name and Address:
MGR	Bodo Kleber  1405 SE 47th St #1  Cape Coral FL 33904
MGR	Ringit 1/060- 50 P. 1400 SE 47 FG ST. 1840
	EFFLORIO, 39
(Use attachment if necessary	)
ARTICLE V: Effective date, if other lif an effective date is listed, the date or 90 days after the date of filing.	than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days price.)
REQUIRED SIGNATURE	
Signature of	a member or an authorized representative of a member.
of this docu	ce with section 608.408(3), Florida Statutes, the execution ment constitutes an affirmation under the penalties of perjury stated herein are true.)
	Bodo Kleber
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)