

### Division of Corporations **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.

(((H100000152593)))



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 : BUSINESS FILINGS Account Number : 105256001620

Phone : (608)827-5300 Fax Number : (608)827-5501

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### Il Veneto LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

G. MCLEOD

JANH218 2010

**EXAMINER** 

1/22/2010

## FAX AUDIT # H100000 152593

# ARTICLES OF ORGANIZATION OF Il Veneto LLC

**ARTICLE I** 

**NAME** 

The name of the limited liability company shall be: Il Veneto LLC

**ARTICLE II** 

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 11915 SW 153 Ct, Miami, Florida 33196.

#### ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Briggitte Lazo, 11915 SW 153 Ct, Miami, Florida 33196. Located in the County of Miami Dade.

#### ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

#### ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:
Briggitte Lazo, 11915 SW 153 Ct, Miami, Florida 33196
Claudio Boccalon, 11915 SW 153 Ct, Miami, Florida 33196

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

Date: January 8, 2010

WI 53717

608-827-5300

FAX AUDIT # H100000152593

10 JAN 22 AH 8: 33

SECRETARY OF STATE OF STATE

## FAX AUDIT # H100000152593

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Il Vencto LLC

The name and address of the registered agent and office is Briggitte Lazo, 11915 SW 153 Ct, Miami, Florida 33196. Located in the County of Miami Dade.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Briggitte Lazo

Date: San/10/10

FAX AUDIT # H100000152593