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**EXAMINER** 



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## **COVER LETTER**

TO:	Registration S Division of Co		·			
SUBJI	SUBJECT: It's All About Properties, LLC					
	Name of Limited Liability Company					
The en	closed Articles o	f Organization and fee(s) are	submitted for filing.			
Please	return all corresp	ondence concerning this mat	ter to the following:			
	Renee' De La	a Cruz				
	Name of Person					
	Firm/Company					
	2811 Lorraine Street					
			Address			
	Tampa, FL 3	3614				
	Tampa, TE O		y/State and Zip Code	1. 2000 1001 100		
	lovebugs4chri	st@yahoo.com				
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Rene	Renee' De La Cruz at ( 813 ) 376-1599					
Name of Person			Area Code & Daytime Telep	hone Number		
Enclos	sed is a check for	or the following amount:				
☑\$125.	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	any is:	
It's All About Properties, LLC		
ARTICLE II - Address:	ted Liability Company, "L.L.C.," or "LLC.")  f the principal office of the Limited Liabili	ity Company is:
Principal Office Address:	Mailing Address:	
Renee' De La Cruz	Renee' De La Cruz	
2811 Lorraine Street	2811 Lorraine Street	
Tampa, FL 33614	Tampa, FL 33614	
	ristered Office, & Registered Agent's Signand was Registered Agent. You must designate an individual of the registered agent are:	
2811 Lorraine Street  Florida street address (P.O. Box NOT acceptable)		PH 1: 5
Tampa	FL 33614	<b>2</b> 3 6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
<u>.</u>	City, State, and Zip	mation specific

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 (REQUIREA)

(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:
Pres, Treas, MGR	Renee' De La Cruz
	2811 Lorraine Street
	Tampa, FL 33614
VP, Sec., MGRM	Mark De La Cruz
	2811 Lorraine Street
	Tampa, FL 33614
<del></del>	
(Use attachment if necessary)	
CI E V. ECCARA data (Cadranda	(ODTIONAL)
ICLE V: Effective date, if other th	nan the date of filing: (OPTIONAL)
	nust be specific and cannot be more than five business days prior
90 days after the date of filing.)	
REQUIRED SIGNATURE:	
$\mathcal{R}_{\varrho}$	née De La Crus
Signature of a	member or an authorized representative of a member.
	U
(In accordance	with section 608.408(3), Florida Statutes, the execution

Renee' De La Cruz

Typed or printed name of signee

of this document constitutes an affirmation under the penalties of perjury

## **Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)