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10 MAY 12 PH 2: LE

T. HAMPTON

MAY 1 3 2010

EXAMINER

280ff of

COVER LETTER

TO:

Registration Section

Division of Co	orporations				
SUBJECT: Marra's	Marinara I I C				
SUBJECT: Manua		ted Liability Compa	iny		
The enclosed Articles of	f Organization and fee(s) are	submitted for filing	ζ.		
Please return all corresp	ondence concerning this mat	ter to the following			
Vicki Lynn Ma	arra				
		Name of Person			
Marra'a Marir	1272				
Walla a Wall	iaia	Firm/Company	<u> </u>		
424 High Tide	. Dr				
424 Figir Fide	, 	Address			
Ot Assessable a	FI 00000				
St Augustine,		ty/State and Zip Code	<u> </u>		
glenmarra@a		y, out the hip code			
<u> </u>	E-mail address: (to be used	for future annual repo	rt notification	n)	
For further information	concerning this matter, pleas	e call:			
Vicki Lynn Marra	·	at (904	471-174	17	
Name of Person Area Code & Daytime Telephone Num		ne Number			
D 1 1: 1 10	4 6 9				
	or the following amount:				
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	2\$155.00 Filin Certified Cop (additional copy	ру	C	160.00 Filing Fee, Pertificate of Status & Pertified Copy additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration of Clifton Boundary 2661 Exe	on Section of Corporati uilding cutive Center ce, FL 3230	ions er Circ	le

RECEIVED

10 MAY 12 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2010

VICKI LYNN MARRA 424 HIGH TIDE DR ST AUGUSTINE, FL 32080

SUBJECT: MARRA'S LLC Ref. Number: W10000022085

We have received your document for MARRA'S LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P03000128439 (MARRA, INC).

Please return the corrected original and one copy of 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 call (850) 245-6855.

Letter Number: 910A00011358

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited Li. ARTICLE II - Address:	ability Company, "L.L.C.," or "LLC.")
ADTICLE II Address	
ARTICLE II - AUUICSS:	
The mailing address and street address of the	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
424 High Tide Dr	424 High Tide Dr
St Augustine, FL 32080	St Augustine, FL 32080
The name and the Florida street address of th	e registered agent are:
Vicki Lynn Marra	
Vicki Lynn Marra Nar	ne
	me
Nar 424 High Tide Dr	address (P.O. Box <u>NOT</u> acceptable)
Nar 424 High Tide Dr Florida street	

ne proper and complete performance of my duties, and I am familiar with a cons of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

10 MAY 12 PH 2: LB

ARTICLE IV- Manager(s) or Managing Member(s):

5 12 A

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:		
"MGR" = Manager "MGRM" = Managing Mer	nber		
MGRM	Vicki Lynn Marra		
	424 High Tide Dr		
	St Augustine, FL 32060		
MGRM	Glen Marra		
	424 High Tide Dr		
	St Augustine, FL 32080		
		<u> </u>	
			
(Use attachment if necessar	•	TIONA I	
(If an effective date is listed, the da to or 90 days after the date of filing	er than the date of filing: (OF te must be specific and cannot be more than five busing.)	rional ress days	prior
REQUIRED SIGNATURE	E:		
Signature o	of a member or an authorized representative of a member.		
of this docu	nce with section 608.408(3), Florida Statutes, the execution ament constitutes an affirmation under the penalties of perjury ts stated herein are true.)		ŽIO.
Vicki Lynr	п Магга	<u> </u>	SE
	Typed or printed name of signee	MAY	紀
Dil. V		12	
Filing Fees:			SY
\$125.00 Filing Fee for Artic	les of Organization and Designation	PH	333

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)