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C. LEWIS

MAY 2 0 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ESTEVO CAR SERVICE UC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Donna Bianco DONNA L. BIANCO
Name of Person
Estero Can Sequice LLC
Firm/Company
19651 Marino Lake Circle Unit #1801
Address
Miromar Lakes FL 33913
City/State and Zip Code
dbinestero@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Donna Bianco at (239-) 362-0324
Donna Bianco at (239-) 362-0324 Name of Person Area Code & Daytime Telephone Number (732) 300 - 2491 Cell
Enclosed is a check for the following amount:
□\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \ \text{□\$\$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \ \text{□}\$\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}
Mailing Address Street/Couries Address

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 Circle Tailahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Estero Car Service UC
(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 Company is:
Principal Office Address: Mailing Address:
19651 MAVINO LAKE CIRCLE TE 1801 MIROMAR LAKES FL 33913 19651 MAVINO LAKE CIRCLE HIROMAR LAKES FL 33913
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:
DONNA L. BIAWCO
DONNA L. BIANCO Name 19651 MAYIND LAKE CIRCLE #1801
Florida street address (D.O. Day MOT accountable)
MIROMAR LAKES FL 33913 City, State, and Zip
City, State, and 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
(1) mussiance
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Filing Fees:

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

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee