## 10000080555

(Requestor's Name)				
(Address)				
(Address)				
(Addiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600183341636

07/30/10--01014--030 \*\*160.00

10 JUL 30 AM IO: 51

T. HAMPTON
AUG = 2 2010
EXAMINER

## **COVER LETTER**

TO:	Registration : Division of C			•	
SUBJECT: LADERA, LLC					
Name of Limited Liability Company					
The end	closed Articles o	of Organization and fee(s) are	submitted for filing.		
Please 1	return all corres	pondence concerning this mat	ter to the following:		
_	Karla Gomez				
	Name of Person				
•	Firm/Company				
;	2420 W. Brandon Blvd #143				
•	Address				
	Brandon, FL 33511				
City/State and Zip Code					
karlajagan@aol.com					
E-mail address: (to be used for future annual report notification)					
For furt	her information	concerning this matter, please	e call:		
Karla Gomez at ( 813 ) 7847346					
Name of Person Area Code & Daytime Telephone Number			hone Number		
Enclose	ed is a check fo	or the following amount:			
<b>⊒\$</b> 125.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	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	ircle	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
ADERA, LLC				
(Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
2420 W. Brandon Blvd.	2420 W. Brandon Blvd.			
<del>‡</del> 143	#143			
Brandon, FL 33511	Brandon, FL 33511			
The name and the Florida street address of the registered agent are:  Christopher Morehouse				
Name				
2420 W. Brandon Blvd #				
Florida street address (P.O. Box NOT acceptable)				
Brandon	FL 33511			
City, Sta	ate, and Zip			
liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S			
(CONTE	MHED)			

Page 1 of 2

) JUL 30 AF

SECRETARY OF STATE

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

**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.)

Typed or printed name of signee

Filing Fees:

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

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

SECRETARY OF STATE DIVISION OF CORPORATION