L10000088409

·
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
AUG 2 3 2010
EXAMIN



900184525339

08/20/10--01008--021 **130.00



Office Use Only

COVER LETTER

то:	Registration S Division of Co					
SUBJI	ECT: BELLA	KITCHEN & BATH LLC	:			
		Name of Limit	ed Liability Cor	mpany		
The en	closed Articles of	f Organization and fee(s) are	submitted for fi	ling.		
Please	return all corresp	ondence concerning this mat	ter to the follow	ring:		
	JOSEPH BAS	SILE				
			Name of Person			
	BELLA KITCI	HEN & BATH LLC				SECRETARY
			Firm/Company			AHA S
	112 N OAK S	T #104 & 105				4,42 - 4
		·	Address			<u> </u>
	LANTANA FL	. 33462				STATE ORIE
			y/State and Zip C	Code		<u>1300 (1.1)</u> 1294
	JOE@JFBCC	NSTRUCTION.NET				
		E-mail address: (to be used	for future annual	report notification	n)	
For fur	rther information	concerning this matter, please	e call:			
JOE 1	BASILE		at (561	₎ 644-18	87	
	Name	of Person		Code & Daytime	Telephone Nun	nber
Enclos	sed is a check for	or the following amount:				
□\$125	.00 Filing Fec	■\$130.00 Filing Fee & Certificate of Status	Certified (additional of	_	Certific) Certific	Filing Fee, cate of Status ed Copy and copy is enclosed.
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regist Divisi Clifto 2661	t/Courier Additation Section ion of Corporation Building Executive Cennassee, FL 3236	tions ter Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	·	
ARTICLE II - Address: The mailing address and street address of the mailing address and street address address and street address address and street address add	the principal office of the Limited Lie	ishility Compan	u ic.
The maning address and street address of		laointy Compan	y 13.
Principal Office Address:	Mailing Address:		
112 N OAK ST #104 & 105	112 N OAK ST #104 & 105		
LANTANA FL 33462	LANTANA FL 33462		
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	n Registered Agent. You must designate an indivi	s Signature: 20 AUS 20 AUS 20 AUS 20	
9054 KENDALE CT Florida stro	Name eet address (P.O. Box <u>NOT</u> acceptable)	PM 2: 30	
9054 KENDALE CT Florida stro LAKE WORTH		نداوية	

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETARY TALL AHASS
MGR	JOSEPH BASILE	441-
	9054 KENDALE CT	<u> </u>
	LAKE WORTH FL 33467	95 5m
		F
(Use attachment if necessary)		
LE V: Effective date, if other than the fective date is listed, the date must b	date of filing: 8/17/10 e specific and cannot be more than	. (OPTIONA
LE V: Effective date, if other than the	date of filing: 8/17/10 e specific and cannot be more than	. (OPTIONA
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	e specific and cannot be more than	five business da
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	e specific and cannot be more than	five business da
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a	er or an authorized representative of a mection 608.408(3), Florida Statutes, the exectitutes an affirmation under the penalties of	ember.
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document const	er or an authorized representative of a mection 608.408(3), Florida Statutes, the exectitutes an affirmation under the penalties of	ember.

Page 2 of 2

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