

L160000092537

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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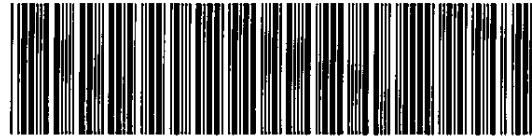
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

S. HAWKES  
SEP 02 2010  
EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: La Palma Properties, LLC  
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:

JOSE ANTONIO FERNANDEZ  
Name of Person

LA PALMA PROPERTIES, LLC.  
Firm/Company

3317 SAM ALLEN OAKS CIRCLE  
Address

PLANT CITY, FL. 33565  
City/State and Zip Code

Opusvetel@aol.com.  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE FERNANDEZ at ( 812 ) 477-1150  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for 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 Circle  
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

LA Palma Properties, LLC.

(Must end with the words "Limited Liability Company, "LLC.," or "LLC.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

3317 Sam Allen Oaks Cr.  
Plant City FL 33565

#### Mailing Address:

3317 Sam Allen Oaks Cr.  
Plant City FL 33565

### 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:

José Fernandez  
Name

3317 Sam Allen Oaks Circle  
Florida street address (P.O. Box **NOT** acceptable)  
Plant City FL 33565  
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.*

José Fernandez  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

Manager

**Name and Address:**

Josie Fernandez  
3317 Sam Allen Oaks Circle  
Plant City, FL 33565

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STATE OF FLORIDA

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 8-29-10 (OPTIONAL)  
(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:**

Josie Fernandez  
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.)

JOSIE FERNANDEZ  
Typed or printed name of signer

**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)