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(Re	questor's Name	)
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PłCK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	ime)
(Do	cument Number	)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	

Office Use Only



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EFFECTIVE DATE 10-29-10

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EXAMINER



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 26, 2010

MARIANO LAMIA 210 SW NATURA AVENUE DEERFIELD BEACH, FL 33441

SUBJECT: CAPELA, LLC. Ref. Number: W10000050252

We have received your document for CAPELA, LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on October 25, 2010. Please amend your document accordingly.

Please return 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 (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 510A00025257

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## COVER LETTER

TO: Registration Division of	n Section Corporations					
SUBJECT: CAP	ELA, LLC					
30 <b>1</b> 00000000000000000000000000000000000	Name of Limite	d Liability Con	npany			
The enclosed Articles	s of Organization and fee(s) are s	submitted for fil	ling.			
Please return all corre	espondence concerning this matte	er to the follow	ing:			
Mariano	P. Lamia					
		Name of Person				
CAPEL	A, LLC.					
		Firm/Company				
210 SW	Natura Avenue				···	_
		Address				
Deerfield	l Beach, FL. 33441					
_	_	/State and Zip Co	ode			
mlamia@	crainatlantis.com E-mail address: (to be used fi	or future enguel r	anort natification)			<del></del>
For further information	on concerning this matter, please		epore nonribution;	Ž	Zón :	
Mariano P. Lar	mia	at ( 954_	917-0411			74 M OCT 29
Nar	ne of Person	Area Co	ode & Daytime Tel	lephone Number		
Enclosed is a check	for the following amount:	•		4 mg/l 1 mg/l 1 mg/l	107 107	e in
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified (	iting Fee & [ Copy copy is enclosed)	\$160.00 Filt Certificate of Certified Cop (additional copy	g Fee. Status py	بر ای
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registi Divisio Cliftor 2661 E	/Courier Address ration Section on of Corporation n Building Executive Center assee, FL 32301	าร		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	y is:	,
CAPELA, LLC.		
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LL.C.")	
ARTICLE II - Address:		
The mailing address and street address of the	ne principal office of the Limited Liabi	lity Company is:
Principal Office Address:	Mailing Address:	
210 SW Natura Avenue	210 SW Natura Avenue	
Deerfield Beach, FL.33441	Deerfield Beach, FL.33441	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	ered Office, & Registered Agent's S Registered Agent. You must designate an individua	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	ered Office, & Registered Agent's S Registered Agent. You must designate an individua	d or another
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of  Mariano P. Lamia	ered Office, & Registered Agent's S Registered Agent. You must designate an individua	d or another
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of  Mariano P. Lamia	ered Office, & Registered Agent's S Registered Agent. You must designate an individual the registered agent are:	d or another
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Mariano P. Lamia  210 SW Natura  Florida street	ered Office, & Registered Agent's S Registered Agent. You must designate an individual the registered agent are:	2819 OCT 29 SCHOOL SARY ( SCHO
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of  Mariano P. Lamia  No.  210 SW Natura	ered Office, & Registered Agent's S Registered Agent. You must designate an individua the registered agent are:   ame   AVENUE	d or another

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..

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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGR.	Albert R. Capellini	
**************************************	210 SW Natura Avenue	_
	Deerfield Beach, FL. 33441	<del></del>
MGR.	Mariano P. Lamia	
	210 SW Natura Avenue	_
	Deerlield Beach, FL. 33441	<del>-</del>
MGR.	George M. Petrocelli	
	210 SW Natura Avenue	_
	Deerfield Beach, FL; 33441	_
	**************************************	<b>-</b>
(Use attachment if necessary)	A September 1	2613
LE V: Effective date, if other than the	date of filing. October 29, 2010	ONFAL
ffective date is listed, the date must be	specific and cannot be more than five business	
days after the date of filing.)	% <sup>आ</sup> र एक<	9
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	) in the second	ယ္
REQUIRED SIGNATURE:	7	ယ
My	Jani	<b>a</b> 5
Signature of a member	r or an authorized representative of a member.	
	408(3). Florida Statutes, the execution of this document	

constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817,155, F.S.)

Mariano P. Lamia

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)