Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

uEmail Address:

Account Name : LAZARUS CORPORATE FILING SERVICE

Account Number: 120000000019
Phone: (305)552-5973
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

9 PH T: 5

## FLORIDA LIMITED LIABILITY CO. ROSESTAR INVESTMENTS LLC

Certificate of Status
Certified Copy

Certified Copy 0
Page Count 03

Estimated Charge \$130.00

A. LUNT

MAR'3 0 2010

**EXAMINER** 

Electronic Filing Menu

Corporate Filing Menu

Help

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
ROSESTAR THVESTMENTS LLC (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:	
CAPE COPAL, EL 33914	2819 SW 34 TERRACE = CAPE COPAL, FL 33914	
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:		
CHRISTOPHER EXPOSITO		
Name		
1819 SW 34 TERRACE		
Florida street address (P.O. Box NOT acceptable)		
CAPE CORAL, FL 339 14  City, State, and Zip		
City, State, and Lip		
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.		
Of Eart		
Registered Agent's Signature (REQUIRED)		

(CONTINUED)

Page 1 of 2

03/29/2011 15:21

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03/03 PAGE PAGE 83/84

15:04 03/28/2011

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H11000082520

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	20
MGR	CHRISTOPHER EXPOSITO TO THE PROPERTY OF THE CAPE COPAL FL 33914
(Use attachment if necessary)	
LEV: Effective date, if other than the ffective date is listed, the date must be deep after the date of filing h	date of filing: 03 39 11 (OPTIONAL) e specific and cannot be more than five business days prior

ARTIC (If an e to or 90

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 perjuty 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.)

> CHRISTOPHER EXPOSITO Typed or primed name of signos