L11000055285

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

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*SECRETARY OF STATE VALLAHASSEE, FLORIDA

HAY -9 PH 4: II

J. SAULSBERRY EXAMINER

MAY 1 0 2011

COVER LETTER

TO: Registration Division of	on Section Corporations		
_{SUBJECT:} 761	1 Pesaro Drive, L.L.	C.	
		Liability Company	
The enclosed Article	es of Organization and fee(s) are su	bmitted for filing.	
Please return all corr	respondence concerning this matter	to the following:	
Frank J	J. Wolicki, C.P.A.		
		Name of Person	
Pionee	r Financial Services	· · · · · · · · · · · · · · · · · · ·	
	F	Firm/Company	,
27201	Ryan Road		•
		Address	
Warren,	Michigan 48092-5127	,	
		State and Zip Code	
_nac35@d	comcast.net		:
	E-mail address: (to be used for	future annual report notification)	· · · · · · · · · · · · · · · · · · ·
For further informati	on concerning this matter, please of	call:	
Frank J. Wolio		at (586) 558-8004	
Na	me of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check	k 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 Clarent Cl	2011 HAY SECRETA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

7611 Pesaro Drive, L.L.C.

(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:

2739 Dick Wilson Drive

Sarasota, FL 34240-8726

2739 Dick Wilson Drive Sarasota, FL 34240-8726

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:

Dennis A. Corona

Name

2739 Dick Wilson Drive

Florida street address (P.O. Box NOT acceptable)

Sarasota

FL' 34240-8726

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

2739 Dick Wilson Drive Sarasota, FL 34240-8726
Sarasota, FL 34240-8726
Nancy A. Corona
2739 Dick Wilson Drive
Sarasota, FL 34240-8726
LORE
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r

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. 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.)

Dennis A. Corona

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)