

L1100072728

Florida Department of State
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.

((H11000165616 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : INCORPORATING SERVICES FL
Account Number : I20050000052
Phone : (302) 531-0855
Fax Number : (850) 656-7953

2011 JUN 22 AM 7:40
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
15147 SUMMIT PLACE CIRCLE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

RECEIVED
11 JUN 22 AM 7:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
JUN 23 2011
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

FILED
2011 JUN 22 AM 7:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF

15147 SUMMIT PLACE CIRCLE, LLC

THE UNDERSIGNED, being legal age and in order to form a Limited Liability Company under and pursuant to the provisions of the Florida Statutes, does hereby adopt the following Articles of Organization:

FIRST: The name of the Limited Liability Company is

15147 SUMMIT PLACE CIRCLE, LLC

SECOND: The principal place of business of this Limited Liability Company which shall also serve as the mailing address of the Limited Liability Company, shall be located at the following address:

109 Cheyenne Street
Tinton Falls, New Jersey 07712

THIRD: The address of the initial registered office of this Limited Liability Company and the name of the registered agent at said address are:

Angelo Santiago
70 Shannon Drive
Santa Rosa Beach, Florida 32459-6606

FOURTH: The management of the Limited Liability Company is vested in a member or member(s) and the name(s) and address(es) of the managing member(s) shall be:

Natalia Santiago
109 Cheyenne Street
Tinton Falls, New Jersey 07712

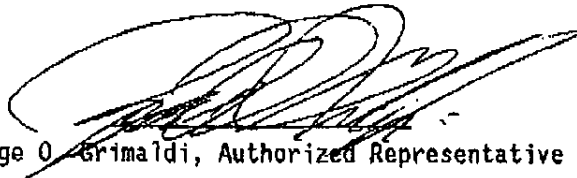
FILED

2011 JUN 22 AM 7:40

SECRETARY OF STATE
TALLAHASSEE FLORIDA

EXECUTION

IN WITNESS WHEREOF, the undersigned, in accordance with Section 608.408(3) of the Florida Statutes, hereby affirms under the penalties of perjury that the facts stated herein are true on June 10, 2011.

A handwritten signature in black ink, appearing to read "Marge O. Grimaldi", is written over a horizontal line.

Marge O. Grimaldi, Authorized Representative

FILED

2011 JUN 22 AM 7:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT AND REGISTERED OFFICE
OF
15147 SUMMIT PLACE CIRCLE, LLC

Pursuant to the provisions of Section 608.415 or 608.507 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida:

FIRST: The name of the Limited Liability Company is:

15147 SUMMIT PLACE CIRCLE, LLC

SECOND: The name and the Florida street address of the registered agent are:

Angelo Santiago
70 Shannon Drive
Santa Rosa Beach, Florida 32459-6606

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in these Articles of Organization, I hereby accept the appointment as registered agent and agree to act in this capacity, and 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 duties and obligations of my position as registered agent as provided for in Chapter 608, F.S.

DATED: 6/15/2011


Angelo Santiago, Registered Agent