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SEURETARY OF STATE
TALLAHASSEE, FLORIO

D. BRUCE
JUL 18 2011
EXAMINER

COVER LETTER

	stration Section sion of Corporations				
SUBJECT:	Fortune 25 Prope	rties LLC			
		(Name of Lim	ited Liability Company)		
The enclosed	Articles of Organization	and fee(s) are sub	mitted for filing.		
Please return	all correspondence conce	erning this matter t	to the following:		
		Deni	se Viola		
_		(Name o	f Person)		•
		Fortune	25 Properties LLC		
		(Firm/Co	ompany)		
		1818 Aubur	rn Lakes Drive	HJ šedi TALL/	
		(Address Rockledge	Florida, 32955	ELARY OF	
		(City/Sta	tte and Zip Code)	FS T	
For further	information concerni	ing this matter,	please call:	46 ATE ORIDA	
Denise_Vi	ola		at (321)213-6460		
(Name of Person			(Area Code & Daytime Telephone Number)	
Enclosed is a	check for the following a	amount:			
□ \$125.00]		0.00 Filing Fee & ificate of Status	■ \$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclo	s &

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:

Fortune 25 Properties 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:

1818 Auburn Lakes Drive Rockledge Florida, 32955 1818 Auburn Lakes Drive Rockledge Florida, 32955

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:

Denise Viola

Name

1818 Auburn Lakes Drive

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

Rockledge Florida, 32955

FL City, State, and Zip

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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: Title: "MGR" = Manager "MGRM" = Managing Member Manager Denise Viola 1818 Auburn lakes Drive Rockledge Florida, 32955

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested. (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:

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.)

<u>Denise Viola</u>

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)

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