

L11000138864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600213864406

11/07/11--01051--020 **125.00

FILED
11 DEC -8 PM 3:34
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

B. BOSTICK

DEC - 9 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DENARO PROPERTIES LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Philip J. Arnold
Name of Person

CASSILO Development
Firm/Company

17 Cambridge Court
Address

LANCASTER N.Y. 14086
City/State and Zip Code

CASSILODEVELOPMENT@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Philip Arnold at (714) 683-5291
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check 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 Circle
Tallahassee, FL 32301

RECEIVED
TALLAHASSEE, FLORIDA
11 DEC -8 PM 3:34

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DENARO 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:

17 Cambridge Court
LANCASTER NY 14086

Mailing Address:

SAMS.

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:

PATRICIA Redd

Name

4737 Stevens Drive

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

SARASOTA FL 34234

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..

X Patricia Redd

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
11 DEC -8 PM 3:34
CLERK OF STATE
TALLAHASSEE, FLORIDA

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

Name and Address:

MGL

MGRM

MIKE PULFETTO
17 CAMBRIDGE COURT
LANCASTER N.Y. 14086

Philip Arnold
17 CAMBRIDGE COURT
LANCASTER N.Y. 14086

STATE
FLORIDA
TALLAHASSEE

11 DEC -8 PM 3:34

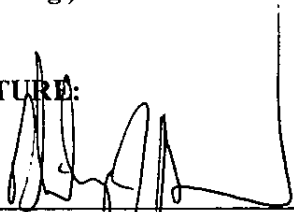
FILED

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(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. 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.)

Philip J. Arnold

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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 8, 2011

PHILIP J. ARNOLD
17 CAMBRIDGS COURT
LANCASTER, NY 14086

SUBJECT: DENARO PROPERTIES LLC
Ref. Number: W11000056953

We have received your document for DENARO PROPERTIES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

Article II is for principal office and mailing addresses only. Please list managers or managing members in Article IV.,

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 call (850) 245-6028.

Barbara Bostick
Regulatory Specialist II

Letter Number: 811A00025381



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 22, 2011

PHILIP J. ARNOLD
17 CAMBRIDGS COURT
LANCASTER, NY 14086

SUBJECT: DENARO PROPERTIES LLC
Ref. Number: W11000056953

We have received your document for DENARO PROPERTIES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Articles I- Name of the Limited liability Company

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The document must be signed by a member or an authorized representative of a member.

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 call (850) 245-6028.

Barbara Bostick
Regulatory Specialist II

Letter Number: 411A00026367