

#L12000072952

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FILED
12 MAY 30 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAY 31 2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 9, 2012

DELUCA & BUZAID / PAUL P DELUCA, ESQ.
59 MAIN ST.
DANBURY, CT 06810

SUBJECT: JSP PROPERTIES LLC
Ref. Number: W12000025886

We have received your document for JSP PROPERTIES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L06000086779 "JSP PROPERTIES LLC".

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 612A00013932

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J S & P Florida 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:

Paul P. DeLuca, Esq.

Name of Person

DeLuca & Buzaid

Firm/Company

59 Main Street

Address

Danbury, CT 06810

City/State and Zip Code

pauldeluca@snet.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul P. DeLuca

Name of Person

at (203) 743-5504

Area Code & Daytime Telephone Number

~~Enclosed is a~~ check for the following amount:

was sent with prior letter

☐ \$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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J S & P Florida 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:

9133 QUARTZ LANE

NAPLES, FL 34109

USA

Mailing Address:

PO BOX 95

BEACON FALLS, CT 06403

USA

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:

Alessio G. Pretto

Name

9133 Quartz Lane

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

Naples

FL 34109

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)

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:

"MGR"

ALESSIO G. PRETTO

9133 QUARTZ LANE

NAPLES, FL 34109

"MGR"

STEPHEN PRETTO

9133 QUARTZ LANE

NAPLES, FL 34109

"MGR"

PHILIP PRETTO

9133 QUARTZ LANE

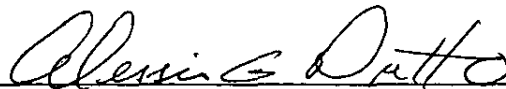
NAPLES, FL 34109

(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.)

Alessio G. Pretto

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)