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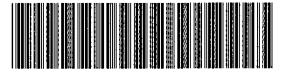
(Re	questor's Name))
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to I	Filing Officer:	
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Office Use Only

B. KOHR

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EXAMINER



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EFFECTIVE DATE 6 18 2012

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COVER LETTER

IO: Registration Section		
Division of Corporations		2
SUBJECT: Formosa Dream Retre	eat s	15/0
Sebucci:	ted Liability Company	
Name of Emili	coa Blacking Company	27
The enclosed Articles of Organization and fee(s) are	submitted for filing.	DINISIUM 25 PM
Please return all correspondence concerning this mat	ter to the following:	.
George Chen		
<u> </u>	Name of Person	
		1,
	EFFECTIVE DATE_6	2/1/2
	Firm/Company	ŀ
7836 West Irlo Bronson High	ghway	
	Address	
	•	
Kissimmee, Florida 34747		
Cit	ty/State and Zip Code	
kdmascot@yahoo.com		
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, please	e call:	
George Chen	at (407) 396-1188	
Name of Person	at (407 396-1188 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is encl	s &
Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

EFFECTIVE DATE 6 18/20 12

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Formosa Dream Retreat, 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:
7836 West Irlo Bronson Highway	7836 West Irlo Bronson Highway
Kissimmee, Florida 34747	Kissimmee, Florida 34747

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:

Name
Irlo Bronson Highway
rida street address (P.O. Box NOT acceptable
_{FL} 34747
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:

MGR	George Chen
	7836 West Irlo Bronson Highway
	Kissimmee, Florida 34747
(Use attachment if necessary)	6/18/2012
F. V. Effective data if other than th	the date of filing: 6/12/2012 . (OPTIONAL)
	be specific and cannot be more than five business day
-	
REQUIRED SIGNATURE:	

George Chen

Typed or printed name of signee

(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

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)

constitutes a third degree felony as provided for in s.817.155, F.S.)