L12000107396

Office Use Only

FFFECTIVE DATE 8/14/12



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08/20/12--01020--019 **J25.00

SECRETARY OF STATE

12 AUG 20 AM 10: 4:

D. BRUCE
AUG 2 1 2012
EXAMINER

LUCAJU LLC

2116 MILLARD CREEK

KISSIMMEE FL 34743

REGISTRATION SECTION

DIVISION OF CORPORATIONS

**PO BOX 6327

TALLAHASSEE FL 32314

RE: L08000079113

I RAMIRO J CORREA AS A MANAGING MEMBER OF LUCAJU LLC RELEASE THE RIGHT TO THE DOCUMENT TO THE NEW ARTICLES OF ORGANIZATION ENCLOSED.

RAMIRO J CORREA

SECRETARY OF STATE TALL AHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	•	
LUCAJU LLC		٠.
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:		
RAMIRO J CORREA		
Name of Person	_	
LUCAJU LLC		
Firm/Company	-	,
2116 MALLARD CREEK		
Address	-	
KISSIMMEE, FL 34743		
City/State and Zip Code	SEC ALL	
MCORREAGARZON@HOTMAIL.COM E-mail address: (to be used for future annual report notification)	AUG CREI	
For further information concerning this matter, please call:	20 ARY VSSE	FILE
RAMIRO J CORREA	AMIO: 42 OF STATE ELFLORID	
Name of Person Area Code & Daytime Telephone Number	5	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}		
Mailing Address Street/Courier Address		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

LUCAJU 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:

2116 MALLARD CREEK

2116 MALLARD CREEK KISSIMMEE FL 3473

KISSIMMEE FL 34743

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:

RAMIRO J CORREA

Name

2116 MALLARD CREEK

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

KISSIMMEE

_{FL} 34743

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..

Régistered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

APPROVE AND FILED

EFFECTIVE DATE 8/14/12

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	•
MGRM	RAMIRO J CORREA
VICITIVI	2116 MALLARD CREEK
	KISSIMMEE FL 34743
MGRM	MARIA C CORREA
	2116 MALLARD CREEK
	KISSIMMEE FL 34743
·	
· .	
(Line attachment if managemy)	
(Use attachment if necessary)	
CLE V: Effective date, if other than	n the date of filing: 08/14/2012 (OPTION
	ist be specific and cannot be more than five business d
0 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.)

Ramiro) Correa
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)

SECRETARY OF STATE
TALL AHASSEE FLORID

AUG 20 AM IO: