# L12000 108236

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





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DIVISION TORPORATION

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TR-SARA

AUG 2 2 2012 T. HAMPTON

# **COVER LETTER**

TO:	Registration S Division of Co			
SUBJE	cct: Amar	nt Homes of Fl	orida LLC	
20202			ted Liability Company	
The end	closed Articles o	f Organization and fee(s) are	submitted for filing.	
Please	return all corresp	ondence concerning this ma	tter to the following:	
	Lou Cefe	olia		
•			Name of Person	
	Amant F	lomes of Florid	da	
·			Firm/Company	
_	1530 SE	Sunshine Ave	е	
			Address	
F	Port St Luci	e, FL 34952		
			ty/State and Zip Code	
-	amantnome	es@hotmail.com E-mail address: (to be used	for future annual report notification)	
For furt	her information	concerning this matter, pleas	e call:	
Lou (	Cefolia		at (772 ) 342-3612	
	Name	of Person	Area Code & Daytime Teleph	none Number
Enclose	ed is a check fo	r the following amount:		
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	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 Cir Tallahassee, FL 32301	cle



12 AUG 21 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 28, 2012

LOU CEFOLIA 1530 SE SUNSHINE AVE PORT ST LUCIE, FL 34952

SUBJECT: AMANT HOMES OF FLORIDA LLC

Ref. Number: W12000034787

We have received your document for AMANT HOMES OF FLORIDA 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 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. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

Please return the corrected original and one copy of 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) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 812A00017689

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is  Amant Home Bui	1100	
·	/	
Amant Homes of Florida   (Must end with the words "Limited Liab		
(Must end with the words Emilied Elec-	mity company, E.E.C., or EEC.	
ARTICLE II - Address:	ringinal office of the Limite	nd Lighility Company is:
The mailing address and street address of the p	ormeipar ornee or the Limite	d Liability Company is.
Principal Office Address:	Mailing Address:	
ou Cefolia	1530 SE Sunshine Ave Port St Lucie, FL 3495	
ARTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve as its own Regi business entity with an active Florida registration.)  The name and the Florida street address of the  Lou Cefolia  Name	stered Agent. You must designate an registered agent are:	
1530 SE Sunst	nine Ave	
Florida street ad	idress (P.O. Box NOT acceptable	:)
Port St Lucie	<sub>FL</sub> 34952	
City, S	tate, and Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p accept the obligations of my position as reg	this certificate, I hereby acce ty. I further agree to comply verformance of my duties, and istered agent as provided for	ept the appointment as with the provisions of all I I am familiar with and
Registered Agent's Signa	ature (REQUIRED)	
CONTIN	VIIFD)	DIVISION 12 AUG

Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
	•
Lou Cefolia MGR	1530 SE Sunshine Ave
	Port St Lucie, FL 34952
Michelle Cefolia MGRM	1530 ES Sunshine Ave
	Port St Lucie, FL 34952
Madisyn Audette MGRM	1530 SE Sunshine Ave
Wadisyn Addelle MGRIM	Port St Lucie, fL 34952
	1 dit di Eddle, 12 04302
(Use attachment if necessary)	
•	
	an the date of filing: (OPTIONAL)
	nust be specific and cannot be more than five business days prior
days after the date of filing.)	
REQUIRED SIGNATURE:	
	26 4h/
Signature of a	member or an authorized representative of a member.
_	•
	ion 608.408(3), Florida Statutes, the execution of this document

(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.)

Lou Cefolia

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)