## 12000153101

(Requestor's Name)
(Address)
(Address)
(Address)
•
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Littly Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
(DEC :- 7 2012
L. SELLERS

Office Use Only



400242408514

12/05/12--01011--012 \*\*155.00

12 DEC -5 PH IZ: 37
SECRETART OF STATE
TALLAHA\*SEE, FLORIDA

## **COVER LETTER**

TO: Registration Division of C	Section Corporations			
	aples Property Managen	nent "L.L.C.	17	
SUBJECT:	Name of Limite	ed Liability Con	npany	
The enclosed Articles	of Organization and fee(s) are s	ubmitted for fill	ing.	
Please return all corre	spondence concerning this matte	er to the followi	ng:	
Gary VanD	eWerken			
		Name of Person		
Old Naples	Property Management	"L.L.C.,"		
<del> </del>		Firm/Company		
181 Weber	Blvd S.			
		Address		
Naples Flo	rida 34117			
garyvande	City werken@yahoo.com	//State and Zip C	ode	
	E-mail address: (to be used for	or future annual r	eport notification)	
For further informatio	n concerning this matter, please	call:		
Gary VanDeWer	ken	239	825-8035	
Name of Person		at () Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount:			
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified (		\$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	Regist Divisio Cliftor 2661 E	/Courier Addres ration Section on of Corporation Building Executive Center	as

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Title: "MGR" = Mana, "MGRM" = Mai	C	Name and Address:
"MGRM"		Gary VanDeWerken
		181 Weber Blvd S
		Naples Florida 34117
(Use attachment	if necessary)	
CLE V: Effective	e date, if other than the	he date of filing: January 1, 2013 (OPTION)
effective date is	listed, the date mur the date of filing.)	st be specific and cannot be more than five busine

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.)

Gary VanDeWerken

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)