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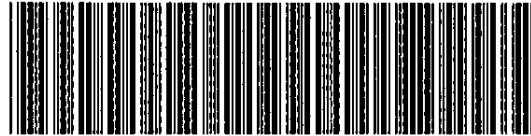
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **SARAHANGELA 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:

AMY M VO, ESQ.

Name of Person

ST. JOHNS LAW GROUP

Firm/Company

580 ANASTASIA BLVD.

Address

ST. AUGUSTINE, FLORIDA 32080

City/State and Zip Code

avo@sjlawgroup.com

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

For further information concerning this matter, please call:

AMY M VO, ESQ

Name of Person

at **(904) 495-0400**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
SARAHANGELA PROPERTIES, LLC**

These Articles of Organization are submitted for the purpose of forming a limited liability company pursuant to the Florida Limited Liability Company Act, Chapter 608, *Florida Statutes*, as the same may from time to time be amended (the "Act").

**ARTICLE I
NAME**

The name of the limited liability company (the "Company") is: SARAHANGELA PROPERTIES, LLC.

**ARTICLE II
ADDRESSES**

The initial mailing address and the principal office address of the Company 2405 E. Caparina Drive, St. Augustine, Florida 32092.

**ARTICLE III
REGISTERED AGENT**

The name and street address of the initial registered agent of the Company is Amy Marie Vo, Esq., St. Johns Law Group, 509 Anastasia Boulevard, St. Augustine, Florida 32080.

**ARTICLE IV
MANAGEMENT**

The Company is to be member managed by Richard Ingrao and Rosario Ingrao.

**ARTICLE V
LIMITED LIABILITY**

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member of the Company, has executed these Articles of Organization this 18 day of December, 2012. 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.

By: _____

Richard Ingrao

By: _____

Rosario Ingrao

ACCEPTANCE OF REGISTERED AGENT

I, Amy Marie Vo, Esq. of St. Johns Law Group, having been named to accept the service of process for Sarahangela Properties, LLC, certify that I am a permanent resident of Duval County, Florida, and do hereby accept to act in this capacity, and agree to comply with the laws of the State of Florida relative to keeping open said office.

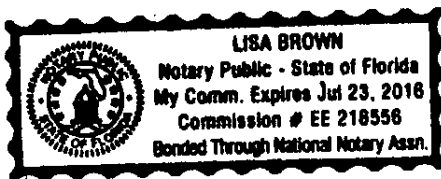
DATED at St. Johns County, Florida, this 2 day of January, A.D., 2013.

By: Amy Marie Vo
Amy Marie Vo, Esq.

STATE OF FLORIDA)
COUNTY OF ST. JOHNS)

I HEREBY CERTIFY that on this day before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared Amy Marie Vo, who is personally known to me and known to be the person/entity described as the authorized agent and resident agent who executed the foregoing Articles of Organization and Acceptance of Registered Agent and acknowledged before me that she executed same.

IN WITNESS WHEREOF, I have hereunder set my hand and affixed my official seal at St. Johns County, Florida, this 2 day of January, A.D., 2013.



Lisa Brown

Notary Public, State of Florida
Printed Name: LISA BROWN
My Commission expires: