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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092 : (850)878-5368

Pax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email	Address:			
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## FLORIDA LIMITED LIABILITY CO.

Juno Shores Properties, LLC

Certificate of Status	0
Certifled Copy	0
Page Count	04
Estimated Charge	\$125,00

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Corporate Filing Menu

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2/21/2013

Z609EE9998 05/51/5013 15:24 (850) 245-6051.

## COVER LETTER

	gutration (	Section orporations		
	Juno Shor	res Properties, LLC	•	
SUBJECT:		Nams of Lim	nited Liability Company	
The englesed	i Articles o	f Organization and fee(s) are	e submitted for filing.	
Please return	all corresp	and spec concerning this ma	atter to the following:	
Caso)	y L. Carhar	t ,		
	· · · · ·		Name of Person	_
Mend	icibeum Sa	leburg	•	
			FirinCompany	_
155 Pi	rospect Av	otane .	· · · · · · · · · · · · · · · · · · ·	
			Address	_
West	Orange, N.	07052		•
	·	•	Stry/State and Zip Code	
ccarha	rt@cusgld.		for future amount report notification)	
For further inf	boustion c	oncoming this matter, picas	•	
Casey L. Cari	iret ·		973 . 243-7942	
	Name o	f Person	Area Code & Daytine Telephone Number	
Enclosed is a	oheck for	the following amount:		
<b>15</b> 125.00 Pili	ng Fes	Certificate of Status	Certified Copy (additional copy is enclosed)  Cartificate of Status & Certified Copy (additional copy is enclosed)	
, ,		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassoo, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, PL 32301	

MED23 - FINANSBIS Majere (Contra Congress

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Juna Shares P	roperties, LLC		
	(Must end with the words "Lim	ited Liability Company, "L.U.C.," or "LUC.")	
ARTICLE	II - Address:		·
The mailing	address and street address of	of the principal office of the Limited Liability Con	npany is:
Principal O	Mice Address:	Mailing Addresss	
10 Nottingham	Court	10 Nottingham Court	
	<del></del>		
ARTICLE I	II - Registered Agent, Reg	Monroe, NJ 08831  istered Office, & Registered Agent's Signature on Registered Agent. You must designate an individual or anothe	
The Limited Lial business entity v	II - Registered Agent, Reg	istered Office, & Registered Agent's Signature on Registered Agent. You must designate an individual or anothe	
ARTICLE I The Limited Lial business entity v	II - Registered Agent, Reg bility Company cannot serve as its o with an autive Florida registration.)	istered Office, & Registered Agent's Signature on Registered Agent. You must designate an individual or another of the registered agent are:	
ARTICLE I The Limited Lial business entity v	II - Registered Agent, Reg bility Company cannot serve as its o with an autive Florida registration.) I the Florida street address	istered Office, & Registered Agent's Signature on Registered Agent. You must designate an individual or another of the registered agent are:	
ARTICLE I The Limited Lial business entity v	II - Registered Agent, Reg bility Company cannot serve as its o with an autive Florida registration.) I the Florida street address	istered Office, & Registered Agent's Signature on Registered Agent. You must designate an individual or another of the registered agent are:	
ARTICLE I The Limited Lial business entity v	II - Registered Agent, Registered Agent, Registered Agent, Registration of the Florida street address C T Corporation System  1200 South Pine Island	istered Office, & Registered Agent's Signature on Registered Agent. You must designate an individual or another of the registered agent are:	
ARTICLE I The Limited Lial business entity v	II - Registered Agent, Registered Agent, Registered Agent, Registration of the Florida street address C T Corporation System  1200 South Pine Island	istered Office, & Registered Agent's Signature on Registered Agent. You must designate an individual or another of the registered agent are:  Name	

Having been named as registered agant 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.

By:

Registered Agents's Signature (REQUIRED)

Sandra Ortoga Assistant Secretary

(CONTINUED)

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: Name and Address: "MGR" = Manager "MGRM" = Managing Member Trever Barnett MGR 10 Nottingham Court Monroe, NJ 08831 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_ (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 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 fellony as provided for in s.817.155, P.S.)

Filme Fees:

\$125.00 Piling Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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Typed or printed name of signee

Casey L. Carhart, Authorized Representative

- 1 NOB/2013 Whiters Kibines C