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### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

Markland 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:

# Mark Stella Name of Person Markland Properties, LLC Firm/Company 19840 NE 19th Avenue Address Miami, Fl . 33179 City/State and Zip Code kingphysh@bellsouth.net E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Stella	<sub>at (</sub> 305	3354434
Name of Person	Area Code	& Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 Filing Fee U\$130.00 Filing Fee & U\$155.00 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 Circle
Tallahassee, FL 32301

# 'ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the L	ıme:	•
	Limited Liability Com	pany is:
Markland Properties, I	LLC	
(M	Must end with the words "Lin	nited 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:
19840 NE 19th Avenu	ıe	19840 NE 19th Avenue
Miami, Fl. 33179		Miami, Fl. 33179
	Mark Stella	of the registered agent are:
		Name
	19840 NE 19th Avenue	
		street address (P.O. Box NOT acceptable)
	Miami, Florida 331	
		City, State, and Zip  t and to accept service of process for the above stated limited

(CONTINUED)

Page 1 of 2

## ARTICLE 1V- Manager(s) or Managing Member(s):

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

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Mark Stella
	19840 NE 19th Avenue
	Miami, Florida 33179
MGR	Elisa Stella
	19840 NE 19th Avenue
	Miami, Florida 33179
	·
(Use attachment if necessary)	
LE V: Effective date, if other than t	the date of filing: March 1, 2013 (OPTIO) ust be specific and cannot be more than five busi
LE V: Effective date, if other than the fective date is listed, the date may be solved a filling.	ust be specific and cannot be more than five busi
LE V: Effective date, if other than the frective date is listed, the date may be or 90 days after the date of filing.  REQUIRED SIGNATURE:	ust be specific and cannot be more than five busi
LE V: Effective date, if other than the frective date is listed, the date may or 90 days after the date of filing.  REQUIRED SIGNATURE:  Signature of a mem  (In accordance with section 6 constitutes an affirmation under a may after that any false info	ust be specific and cannot be more than five busi )
TEV: Effective date, if other than the fective date is listed, the date may be safter the date of filing.  REQUIRED SIGNATURE:  Signature of a mem  (In accordance with section 6 constitutes an affirmation under 1 am aware that any false info	about or an authorized representative of a member.  508.408(3), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true.  509.408(3) or an authorized representative of a member.

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)

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