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B. BOSTICK
MAR **2 6** 2013

**EXAMINER** 

(850) 245-6051.

# **COVER LETTER**

TO:

**Registration Section Division of Corporations** 

Elite Florida Real Estate

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:

Tallahassec, FL 32314

Debora	h Bacarella						
		Name of Person					_
Elite Flo	orida Real Est	tate					
<u></u>		Firm/Company		<del></del>			
280 NV	V 64th St						
		Address					
Boca R	aton, Fl. 3348	37			FALL .	ಪ	
	Cit	y/State and Zip Co	ode		25:	HAR	****
DebBacai	rella@gmail.com	•			As.	25 25	-*ON.
	E-mail address: (to be used )	or future annual r	port notification	on)	- SEE		i ma
For further information	concerning this matter, please	call:				Ş. H. C;	
Deborah B	lacarella	<sub>at</sub> 561	, 239-	2300	AHASBEE, FLORIBA	8: 19	e ieu
Name	of Person	Area Co	de & Daytime	Telephone Nun	nber		
Enclosed is a check f	or the following amount:						
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified (additional c	_	) Certifi	O Filing cate of Sed Copy in the copy in t	Status 4 7	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registi Divisio Cliftor	Courier Addration Section on of Corporate Building	tions			

Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is:

Elite Florida Real Estate, LLC.	
(Must end with the words "Limited 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:

rrincipai Offic	Address:	Mailing Address:			
280 NW 64th St		PO Box 1584			
Boca Raton, Fl. 334	37	Boca Raton, Fl. 33429-1584		_	
The Limited Liability	Registered Agent, Registered ( Company cannot serve as its own Registered an active Florida registration.)				
I'he name and th	e Florida street address of the reg	pistered agent are:	ALLY	13 MAR	
	Deborah Bacarella		Ť.	AR	
	Name		AHASSI	25	[=====================================
	280 NW 64th St				
	Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)	0 3 3 3 3 3	ထ	الرسدة
	Boca F	aton, Fl. 33487	TKI C ORIDA	19	
	City State	and Zin	مخسف		

Having been named as registered agent 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

MGRM	Doharah Bassalla
MGRM	Deborah Bacarelia 280 NW 64th St
	Boca Raton, Fl. 33487
	2002 / 121011 / 1110010
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	m <sub>e</sub> P
	FLC &
	State of the state
(Use attachment if necessary	)
	than the date of filing: (OPTIONA
or 90 days after the date of	ate must be specific and cannot be more than five busines
or to days arter the date or	ining.)
•	

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.)

> Deborah Bacarella 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)