## L13000145681

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	ocument Number)	· )
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
<u>.                                    </u>		

Office Use Only



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## COVER LETTER

TO:	Registration S Division of Co				
SHRI	L and L ECT:	. Specialty Imports, LL0	C		
300	<u> </u>	Name of Limit	ed Liability Compa	any	
The er	nclosed Articles o	of Organization and fee(s) are	submitted for filing	<u>;</u> .	
Please	return all corresp	pondence concerning this matt	er to the following	:	
	Lawrence C	. Zensen			
			Name of Person	·· · · · ·	
	L and L Spe	cialty Imports, LLC			
			Firm/Company		
	2164 Vardin	Place			
			Address		
	Naples, FL.	34120			
	LandLspecia	Cit altyimports@gmail.com	y/State and Zip Code	3	
		E-mail address: (to be used to	for future annual repo	ort notification)	
For fu	rther information	concerning this matter, please	call:		
Law	rence C. Zen	sen	239	300-0803	
	Name	of Person	_ at ( Area Code	& Daytime Tele	phone Number
Enclo	sed is a check for	or the following amount:			
<b>]</b> \$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filin Certified Co (additional copy	ру	\$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	Registrati Division Clifton B 2661 Exe	ourier Address ion Section of Corporations building ecutive Center C	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Comp	pany is:
L and L Specialty Imports, LLC	
L and L Specially imports, LLC	
(Must end with the words "Limi	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address o	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:

Timelpar Office Address.	Mannig Addiess.
2164 Vardin Place	2164 Vardin Place
Naples, FL. 34120	Naples, FL. 34120

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Lawrence C. Zense	en
	Name
2164 Vardin Place	
Florida s	street address (P.O. Box NOT acceptable)
Naples, Fl. 34120	FL
	City, State, and Zip

EILED SEON TANK OF STANE

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

<u>Title:</u> "MGR" = "MGRM"	Manager = Managing N	Member	Name and Address:	
MGRM	<del></del>		Lawrence C. Zensen 2164 Vardin Place Naples, FL. 34120	
	<del> </del>			
(Use attac	hment if neces	ssary)		
FICLE V: Ef	fective date, if ate is listed, t	other than the d	late of filing: January 1, 2014 . (OP	
FICLE V: Eff an effective day or to or 90 day	fective date, if ate is listed, t	other than the d he date must b te of filing.)		
FICLE V: Eff an effective day or to or 90 day	fective date, if ate is listed, to safter the date.  ED SIGNATI  Signation	other than the dhe date must he of filing.)  URE:  Outer Of a member of	be specific and cannot be more than five	SECRETARY OF STA
FICLE V: Eff an effective day or to or 90 day	fective date, if ate is listed, to a safter the date.  ED SIGNATI  Signate  (In accordance of constitutes an at I am aware that	other than the dhe date must he of filing.)  URE:  Output  Out	be specific and cannot be more than five	SECONDIAGO OF STATE

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)