# L17000162699

(Requestor's Name)	_	
(Address)	_	
(Address)	_	
(City/State/Zip/Phone #)	_	
PICK-UP WAIT MAIL		
(Business Entity Name)	_	
(Document Number)		
Certified Copies Certificates of Status	_	
Special Instructions to Filing Officer:	7	

Office Use Only



300253543633

11/19/13--01003--018 \*\*160.00



#### COVER LETTER

TO:

Registration Section Division of Corporations

SURJECT: Angel's Fire Entertainment

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:

## Mario MonteLeone

Name of Person

Firm/Company

## 8336 Diamond Cove Circle

Address

Orlando, FL 32836

City/State and Zip Code

Mariosknn@yahoo.com

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

For further information concerning this matter, please call:

## Mario MonteLeone

407

468-9*707* 

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

**□**\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & 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

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Angel's Fire Entertainment LLC.		
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Cor	mpany is:
Principal Office Address:	Mailing Address:	
8336 Diamone Cove Circle	8336 Diamond Cove Circle	
Orlando, FL 32836	Orlando, FL 32836	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the re  Mario MonteLeone  Name  8336 Diamond cove Circle  Florida street addr  Orlando, FL 32836	red Agent. You must designate an individual or anoth	8 HOV 10 AND
City, Stat		is a
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity all statutes relating to the proper and complete and accept the obligations of my position as registered Agent's Signature.	nis certificate, I hereby accept the appoint ty. I further agree to comply with the pro performance of my duties, and I am fami histered agent as provided for in Chapter	ment as visions of lliar with

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Mario MonteLeone
	8336 Diamond Cove Circle
	Orlando, FL 32836
<del></del>	<del> </del>
(Use attachment if necessary)	December 1,2013
ICLE V: Effective date, if other than the n effective date is listed, the date mus to or 90 days after the date of filing.)	e date of filing: November 301 3. (OPTIONAL) at be specific and cannot be more than five business day
to or yo days after the date or ming.)	· · · · · · · · · · · · · · · · · · ·
REQUIRED SIGNATURE:	
Signature of a membe	er or an authorized representative of a member.
(In accordance with section 60) constitutes an affirmation unde I am aware that any false information in the control of the co	8.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. The mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)
Mario J. MonteLeone	₽
T	yped 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)