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CAPITAL CONNECTION, INC.

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LOGOS PROPERTY MANAGEMENT, LLC	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	✓ Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
Signature 1	Vehicle Search
	Driving Record
Requested by: BA	UCC 1 or 3 File
Name 7	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
Must end with the words "Linkited Liability	Company L.L.C., or LLC.	LC.		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:			
Pembroke Pines, FL 33024	5113 Chapel	NC 2.8314		
Pembroke Pines, FL 33024.				
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:				
Giacomo Colletti				
~				
540 NW 98 AVE				
Florida street address (P.O. Box NOT acceptable)				
Pembrake Pines FI. 33024 City, State, and Zip				
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	Colletti (REQUIRED)	FIL 2013 DEC -5 SECRETARY TALLAHASS		
(CONTINUE	(D)	Barelines .		
Page 1 of 2		AM IO: 2 OF STATE E. FLORI		

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 Mcmber	Name and Address:
MGRM	Giacomo Colletti 540 NW 98AVE Pembroke Pines FL 33024
(Use attachment if necessary) ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must b prior to or 90 days after the date of filing.)	te of filing: 5 Dec 2013 (OPTIONAL) e specific and cannot be more than five business days
REQUIRED SIGNATURE:	
Signature of a member o	r an authorized representative of a member.
constitutes an affirmation under the	8(3), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true, on submitted in a document to the Department of State provided for in s.817.155, F.S.)
	Colletti Aug
Filing Fees: \$125.00 Filing Fee for Articles of Organize of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	SSI 5