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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: CUrri Properties Viera Partners, 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: |
| John D. Curri Name of Person |
| Name of Person |
| CUrri Properties Viera Portners, LLC |
| 2893 N Harbor City Blvd |
| Melbourne, FL 32935 City/State and Zip Code |
| John Curriproperties, net E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| JOHN CUVI at (321) 266-9565 Name of Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| □\$125.00 Filing Fee Certificate of Status □\$130.00 Filing Fee & Certificate of Status □\$155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) |
| Mailing Address Street/Courier Address |

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



September 30, 2013

JOHN D CURRI 2893 N. HARBOR CITY BLVD. MELBOURNE, FL 32935

SUBJECT: CURRI PROPERTIES VIERA PARTNERS, LLC

Ref. Number: W13000046058

We have received your document for CURRI PROPERTIES VIERA PARTNERS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

Document was received on 08/16/13. I am enclosing new forms.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 913A00019728

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Curri Properties Viera (Must end with the words "Limite | Partners, LLC ad Liability Company, "L.L.C.," or "L.L.C.,") |
|---|---|
| ARTICLE II - Address: The mailing address and street address of | the principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 8265 N Wickham Rd | 2893 N Harbor City Blvd |

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:

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

The Slonim Law Firm, P. A.

Name

2317 North Wickham Bd

Florida street address (P.O. Box NOT acceptable)

Melbourne FL 32935

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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

4-4

ARTICLE IV- Manager(s) or Managing Membar(s):
The name and address of each Manager or Makaging Member is as follows:

| Title: "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
|--|---|
| MGR | John Self 304 Orange St. Melbourne Beach, FL. 32951 |
| MGR | John & Curri 2893 N Harbor City Blvd Melbourne, PC 32901 |
| | |
| (Use attachment if necessary) | |
| ARTICLE V: Effective date, if other the (If an effective date is listed, the date prior to or 90 days after the date of fili | an the date of filing: (OPTIONAL) must be specific and cannot be more than five business days ing.) |
| REQUIRED SIGNATURE: | nember or an authorized representative of a member. on 605.0203), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true information submitted in a document to the Department of State |
| constitutes an affirmation I am aware that any false | on 605.0203). Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.) |
| | 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)