

Division of Corporations **Electronic Filing Cover Sheet**

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(((H14000004730 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

right the email address for this business entity to be used for future.

Cannual report mailings. Enter only one email address please.** ail Address:

FLORIDA LIMITED LIABILITY CO. ALEX IMMOBILIARE LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

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B. BOSTICK

JAN - 9 2013

https://efile.sunbiz.org/scripts/efileovr.exe

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EMPIRE CORP

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Alex Immobiliare	LLC			
Name of Lin	nited Liability Company			
The enclosed Articles of Organization and fee(s) ar	re submitted for filing.			
Please return all correspondence concerning this ma	atter to the following:			
Bruno Sartori				
	Nume of Person			
	Pirm/Company			
255 Oceanic Aver	nue			
	Address	·		
Fort Lauderdale, F				
c sartori@sartorlusa.com	ity/State and Zip Code			
~~~	o be used for future annual repo	rt notification)		
For further information concerning this matter, please	me call:		=1	
bruno sartori	954 \ 309-110	9		Ziri Jan
Name of Person	Area Code Daytime Telepi	none Number	E	ينظل
Enclosed is a check for the following amount:			S)-	1
\$125.00 Piling Fee \$130.00 Piling 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)		AH &: 39
Maling Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Add Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahossee, FL 323	tions ter Circle		

H14000004730

## AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Lex immosiliare u.c		
	ust end with the words "Lim	ited Lightlity Company, "L.L.C.," or "LLC.")
RTICLE II - Address to malling address and		nal office of the Limited Liability Company is:
rincipal Office Addre	ii: M	(ailing Address:
S OCEANIC AVENUE		255 OCEANIC AVENUE
ORT LAUDERDALE, FLORIDA	, 39368	FORT LAUDERDALE, PLORIDA 33908
other business entity	company cumust serve as its consists an active Florida regists a street address of the regist	
_	BRUNO SARTORI	
	N	ane
-	265 OCEANIC AVENUE	Town NOT
	Florida street address (P.O.	
-	FORT LAUDERDALE	**************************************
	City	<b>Zip</b>
the place designated	ree to comply with the provis m familiar with and accept th	iccept the appointment as registered agent and agree to act in this tons of all examples relating to the proper and complete performance se obligations of my position as registered agent as provided for in Chapter 605, ILS
of my duties, and I a	,	Signature (REQUIRED)
of my duties, and I a	(con-	]

9696889908 25:22 \$102/40/10

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AUBR/MOR	ALEX STAMPATORE
	255 OCEANIC AVENUE FORT LAUDERDALE FLORIDA 25308
	PORT DODERDALE PLOYIDA SCORE
	•
	*11
Use attachment if accessary)	
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f filing.)	specific and cannot be more than five business days prior to or 90 d
f filing.)	specific and cannot be more than five business days prior to or \$0 d
f filing.) E VI: Other provisions, if any.  REQUIRED SIGNATURE:	Zano Carton
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H14000004730



January 8, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

EMPIRE CORPORATE KIT COMPANY

SUBJECT: ALEX IMMOBILIARE LLC

REF: W14000001288

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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.

Barbara Bostick Regulatory Specialist II FAX Aud. #: H14000004730 Letter Number: 714A00000436

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

P.O BOX 6327 - Taliahassee, Florida 32314

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