## 114000064931

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	<del></del>
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		}

Office Use Only



100258982881

04/18/14--01010--014 \*\*125.00

TA APR 18 AM 10: 0: SECRETARY

APR 2 2 2014

\_ \_\_\_

## **COVER LETTER**

	ion Section of Corporations		<b>*</b> • • • • • • • • • • • • • • • • • • •
SUBJECT:		Camino Real	LLC
	Name of Lin	nited Liability Company	
The enclosed Artic	les of Organization and fee(s) ar	e submitted for filing.	
Please return all co	rrespondence concerning this ma	atter to the following:	
	Scott Jo	buson	
		Name of Person	
		Firm/Company	
	10150 NW :	58th CT	
	Parkland,	FC 33076 ity/State and Zip Code	
	C	ity/State and Zip Code	
<i>P</i>	Hex 1 2ach 2 a	A OL. COM  I for future annual report notifica	
	E-mail address: (to be used	1 for future annual report notifica	ttion)
For further informa	tion concerning this matter, plea	se call:	
Sco H	- Johnson atl	954	373
N	lame of Person	Area Code Daytime Tel	lephone 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:  330 West Canino Real (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
330 West Camino Real LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
10150 NW 58th CT Parkland, FI 33076 10150 NW 58th CT Parkland, FI 33076
another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  Scott Janson Name
10150 NW 58th Court
Florida street address (P.O. Box <u>NOT</u> acceptable)
Parkland FL 33076 City Zip
City 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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u> </u>	Name and Address:
'AMBR" = Authorized Member	
MGR" = Manager	
Manager	Scott Johnson
	10120 NM SKY COUR
	Perkland, FZ 33076
manager	Samantha Johnson
	10120 MM Z8+ COOL+
	Parkland, FZ 33076
	Tantel 1/2 330.
7 44 1 416	
V: Effective date, if other than the dative date is listed, the date must be	nte of filing:
V: Effective date, if other than the dative date is listed, the date must be a filing.)	ate of filing:
V: Effective date, if other than the dative date is listed, the date must be filling.)	ate of filing: (OPTIONAL)  specific and cannot be more than five business days prior to or 9
Use attachment if necessary)  V: Effective date, if other than the dative date is listed, the date must be a filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:	ate of filing:
V: Effective date, if other than the date is listed, the date must be a filing.)  VI: Other provisions, if any.	ate of filing:
V: Effective date, if other than the date is listed, the date must be a filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 9
V: Effective date, if other than the date is listed, the date must be a filing.)  VI: Other provisions, if any.  EQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 9
V: Effective date, if other than the date is listed, the date must be a filing.)  VI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a range of the control of	nember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
CV: Effective date, if other than the date is listed, the date must be a filing.)  EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a region of the constitutes an affirmation under the constitutes and the constitutes and the constitutes an affirmation under the constitutes and the constitutes an affirmation under the constitutes and the constitutes are constituted and the constitutes and the constitutes and the constitutes are constituted and the constitutes are constituted and the constitutes and the constitutes are constituted and the constitutes and the constitutes are constituted and the constitu	nember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true.
V: Effective date, if other than the date is listed, the date must be a filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a region of the constitutes an affirmation under a management of the constitutes and affirmation under the constitutes and af	nember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State
V: Effective date, if other than the date is listed, the date must be a filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a region of the constitutes an affirmation under a management of the constitutes and affirmation under the constitutes and af	nember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true.
V: Effective date, if other than the date is listed, the date must be a filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a region of the constitutes an affirmation under a management of the constitutes and affirmation under the constitutes and af	nember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State
V: Effective date, if other than the date is listed, the date must be a filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a region of the constitutes an affirmation under a management of the constitutes and affirmation under the constitutes and af	nember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. ormation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.)
V: Effective date, if other than the date is listed, the date must be a filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a region of the constitutes an affirmation under a management of the constitutes and affirmation under the constitutes and af	nember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)
CV: Effective date, if other than the date is listed, the date must be a filing.)  EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a recordance with section of a constitutes an affirmation under a management of the constitutes and affirmation under a management of the constitutes and affirmation under a management of the constitutes and affirmation under	nember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)
V: Effective date, if other than the dative date is listed, the date must be filing.)  VI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a range (In accordance with section constitutes an affirmation un I am aware that any false information constitutes a third degree fellows.	nember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.)  Typed or printed name of signee