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Effective Date

4/21/14

2014 APR 24 AM II: 39
SECRETARY OF STATE
TALL AND ASSEFT. FLORIDA

1 L C D

APR 2 9 2013 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 843 Lagoon LLC Nafaco 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:
ERIK FINE Name of Person
Name of Person
Blue Water Realty
. Firm/Company
415 cape coral Parkway West
Address
Cape Coral H. 33914 City/State and Zip Code ERIKFINE each. Com E-mail address: (to be used for future annual report notification)
ED IV Fin 19 0 and Characteristics
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
To take monator colociting and make, preuse can
ERUK FINE at (239) 898-5750
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$\sum_{\text{S125.00 Filing Fee}} \sum_{\text{S130.00 Filing Fee}} \& \sum_{\text{S130.00 Filing Fee}} \& \text{Certified Copy} \\ (additional copy is enclosed) \\ \text{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

Effective Date 4 21 14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ΔI	RTI	CI	F I	_ 1	Na	me:

The name of the Limited Liability Company is:

(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:
15 Cape Coral Pluy W.	Same
Cape Coral, Pl. 33914	

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:

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

Cape Coral

FL 33914

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED.
2014 APR 24 AM 11: 39
SECRETARY OF STATE
SECRETARY FLORIDA

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	ERIK FINE 1502 NE IST TER
MGR	Cape Coral, CI. 33909 NORMAN GAUMER 7914 Seneca tuenpike Clinton, Ny 13323
(Use attachment if necessary) CLE V: Effective date, if other than the date of effective date is listed, the date must be speciate of filing.)	filing: (OPTIONAL) fic and cannot be more than five business days prior to or 90 da
CLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	

ERIK FINE
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)

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SECRETARY OF STATE