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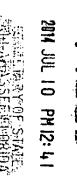
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
•		:
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Office Use Only



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UUL 10 2014 D. BRUCE

COVER LETTER

*'[‡]TO:

Registration Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Div	rision of Corporations		
SUBJECT:	Gregory (Name of Lin	ofano, A.C., LLC. mited Liability Company	
The enclosed	d Articles of Organization and fec(s) a	re submitted for filing.	
Please return	n all correspondence concerning this m	natter to the following:	
	Gregora Cofan	Name of Person	
_		Name of Person	
_		T: (0	
		Firm/Company	
_	8000 Ked Bug	Late Rd. Suite 220 Address	
	•	Address	
	Oviedo FL	3 2 765° City/State and Zip Code	
_		City/State and Zip Code	
	Cofano g & g ma	ed for future annual report notification)	
For further in	nformation concerning this matter, ple	ease call:	,
Gregor	Cofano De al	407 977 2240 Area Code Daytime Telephone Number	20
- 0	Name of Person	Area Code Daytime Telephone Number	5 70
Enclosed is a	a check for the following amount:	100 (100 (100 (100 (100 (100 (100 (100	
□ \$125.00 Fili		□\$155.00 Filing Fee & □\$160.00 Filing Fee Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy □ (additional copy is enclosed)	<i>∾</i>
	Mailing Address Registration Section	Street/Courier Address Registration Section	

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Limited Liability Con					
G	Congression (Must end with t	Cofano	, 1.0	. LLC	? 	
	(Must end with t	he words "Limited I	Liability Compa	ny, "L.L.C.,"	or "LLC.")	
ARTICLE II - A	Address: ress and street addres	s of the principal of	ice of the Limit	ed Liability C	ompany is:	
Principal Office	Address:		Mailing Add	ress:		
8000 Red Oviedo, F	Bug Lake Rd	. suite 220	Sooo A	ed Bug	Lake RJ.	Suite 22
(The Limited Lia	Registered Agent, Fability Company cannot sentity with an active	ot serve as its own I	Registered Agen			dual or
The name and the	e Florida street addre	_	_	•		
	610	V Name	ano,	5		
	2	Name				
	8000	led Buy La address (P.O. Box	he Rd.	Suite 2	720	
	Florida stree	address (P.O. Box	NOT acceptable	e)		
	CV1 -4	City	FL	32 765	•	
		City	•	Zip		
the place des capacity. I fur	med as registered ago signated in this certific ther agree to comply and I am familiar wit	cate, I hereby accept with the provisions of h and accept the obli	the appointmen f all statutes rela	t as registered ating to the pr	agent and agree to oper and complete	to act in this performance
		NO so				
	Regist	ered Agent's Signat	ure (REQUIRE	D)	_	
		(CONTINUI	ED)		. 9.00	
		Page 1 of 2				

AMBR" = Authorized Member MGR" = Manager MGR		
MGR		
	Gregory Cofano, O.C.	
	8000 Red Bug Lake Rd. S	ut e
	Oviedo, Pc 32765	
	•	
		_
Use attachment if necessary) V: Effective date, if other than the date of filtive date is listed, the date must be specificated.	filing: (OPTIONAL) ic and cannot be more than five business days prior to	or 90 d
V: Effective date, if other than the date of five date is listed, the date must be specififiling.)	filing: (OPTIONAL) ic and cannot be more than five business days prior to	or 90 d
V: Effective date, if other than the date of fitive date is listed, the date must be specific	filing: (OPTIONAL) ic and cannot be more than five business days prior to	or 90 d
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V: Effective date, if other than the date of five date is listed, the date must be specififiling.) VI: Other provisions, if any. EOUIRED SIGNATURE: Signature of a memb (In accordance with section 605.0)	er or an authorized representative of a member. 203 (1) (b), Florida Statutes, the execution of this docum	
V: Effective date, if other than the date of five date is listed, the date must be specififiling.) VI: Other provisions, if any. EOUIRED SIGNATURE: Signature of a memb (In accordance with section 605.0) constitutes an affirmation under the	er or an authorized representative of a member. 203 (1) (b), Florida Statutes, the execution of this docume penalties of perjury that the facts stated herein are true.	
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Page 2 of 2

