

L14000143185

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(((H14000213495 3)))



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**FLORIDA LIMITED LIABILITY CO.
ROSANNA AT BAYSHORE, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

2014 SEP 12 AM 9:34
SECRETARY OF STATE
TALLAHASSEE FLORIDA



September 12, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

SUBJECT: ROSANNA AT BAYSHORE, LLC
REF: W14000055681

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

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

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.

Deborah Bruce
Regulatory Specialist II

FAX Aud. #: H14000213495
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY****ARTICLE I – Name:** The name of the Limited Liability Company is:**Rosanna at Bayshore, LLC****ARTICLE II – Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:11251 NW, 20th Street, Suite 119,
Miami, FL, 33172.**Mailing Address:**11251 NW, 20th Street, Suite 119
Miami, FL, 33172.**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's
Signature:**

The name and the Florida street address of the registered agent are:

AMEDEO MUSCELLI11251 NW, 20th Street, Suite 119
Miami, FL 33172

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..

AMEDEO MUSCELLI

Registered Agent's Signature(CONTINUED)
Page 1 of 2

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ARTICLE IV – Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

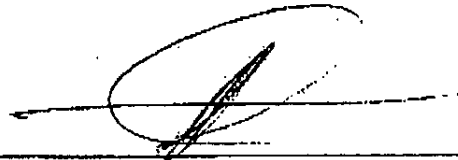
MGR

ROSANNA DI STEFANO

MGR

AMEDEO MUSCELLI

REQUIRED SIGNATURE:



Signature of a member or an authorized
representative of a member.

(In accordance with section 605 Florida
Statutes, the execution of this document constitutes an
affirmation under the penalties of perjury that the facts
stated herein are true.)

AMEDEO MUSCELLI

Typed or printed name of signee

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