614000174829

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
	y/State/Zip/Phon	-
(Cit	.y/State/Zip/Fnon	e # <i>1</i>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
,	·	•
	cument Number)	
(DC	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
popular managements to	i ming Gilloci.	
		Į
. 		

Office Use Only



800265493478

11/10/14--01052--003 **160.00

14 NOV 10 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORING

E SECRETARIO 2014

John Michael Murrell

424 NW 17th St.

Delray Beach, Fl, 33444

(561) 296-2882 (Work) (863) 528-6018 (Cell)

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: <u>Luca Imports LLC</u> Name of Li	mited Liability Company	· · · · · · · · · · · · · · · · · · ·
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this n	natter to the following:	
	John Michael Murrell		
		Name of Person	
	Luca Imports LLC		
		Firm/Company	
	424 NW 17th St		
		Address	
	Delray Beach, FL, 33444		
		City/State and Zip Code	
<u>jo</u>	hnmichaelmurrell24@gmail.com E-mail address: (to be use	ed for future annual report notifica	ation)
For fur	ther information concerning this matter, ple	ease call:	
<u>John</u> l	Michael Murrell at (Name of Person	863 <u>5286018</u> Area Code Daytime Te	lephone Number
	ed is a check for the following amount:	_	_
□ \$125.0	00 Filing Fee \$\times \text{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	Street/Courier Add Registration Section	ress
	Division of Corporations	Division of Corporat	tions

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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:

Luca Imports LLC.		
(Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC."	")
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is	s:
Principal Office Address:	Mailing Address:	
424 NW 17th St.	424 NW 17th St.	
Delray Beach, FL, 33444	Delray Beach, FL, 33444	
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as it	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate a	n individual or
(The Limited Liability Company cannot serve as it another business entity with an active Florida regineration)	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate a stration.)	
(The Limited Liability Company cannot serve as it another business entity with an active Florida region The name and the Florida street address of the region in the server and the Florida street address of the region in the server and the Florida street address of the region in the server and the Florida street address of the region in the server and the Florida street address of the region in the server and the Florida street address of the region in the server and the Florida street address of the region in the server and the server and the server and the server and the Florida street address of the region in the server and th	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate a stration.)	
(The Limited Liability Company cannot serve as it another business entity with an active Florida region The name and the Florida street address of the region John Michael Murrell	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate a stration.)	14 NOV 10 SECRETARY
(The Limited Liability Company cannot serve as it another business entity with an active Florida region The name and the Florida street address of the region John Michael Murrell	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate a stration.) istered agent are:	14 NOV 10 SECRETARY
(The Limited Liability Company cannot serve as it another business entity with an active Florida reginerate and the Florida street address of the reginerate and the Florida street address of the reginerate address of the regin	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate a stration.) stered agent are: Name	14 NOV 10 SECRETARY
(The Limited Liability Company cannot serve as it another business entity with an active Florida reginerate and the Florida street address of the reginerate and the Florida street address of the reginerate address of the regin	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate a stration.) stered agent are: Name	14 NOV 10 PH SECRETARY OF STALLAHASSEE, FI

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized M	lember
'MGR" = Manager	
AMBR	John Michael Murrell
	424 NW 17th St.
	Delray Beach, FL. 33444
	<u> </u>
	117
	(V.)2:
	M→ 0
	m _C ¬
	<u> </u>
	25 KG
	<u> </u>
	
T 1	aru)
	er than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prior to or 90
EV: Effective date, if oth octive date is listed, the de	er than the date of filing:
E V: Effective date, if othective date is listed, the daffiling.)	er than the date of filing:
E V: Effective date, if oth ective date is listed, the diffiling.) E VI: Other provisions, if a second control of the control	er than the date of filing:
E V: Effective date, if oth ctive date is listed, the diffiling.) E VI: Other provisions, if a second secon	ate must be specific and cannot be more than five business days prior to or 90 any. RE: Multal Murrell mature of a member or an authorized representative of a member.
E V: Effective date, if oth ctive date is listed, the diffiling.) E VI: Other provisions, if a secondaria conductive date is listed, the diffiling.)	are than the date of filing:
E V: Effective date, if oth ctive date is listed, the diffiling.) E VI: Other provisions, if a secondary of the constitutes an accordance constitutes an accordance.	are must be specific and cannot be more than five business days prior to or 90 any. RE: Multiple Must be specific and cannot be more than five business days prior to or 90 any. RE: mature of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true.
E V: Effective date, if oth ctive date is listed, the diffiling.) E VI: Other provisions, if a secondary of the constitutes an at I am aware that	RE: Multiple Multiple Multiple atture of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true. any false information submitted in a document to the Department of State
E V: Effective date, if oth ctive date is listed, the diffiling.) E VI: Other provisions, if a secondary of the constitutes an at I am aware that	are must be specific and cannot be more than five business days prior to or 90 any. RE: Multiple Must be specific and cannot be more than five business days prior to or 90 any. RE: mature of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true.
E V: Effective date, if oth ctive date is listed, the diffiling.) E VI: Other provisions, if a secondary of the constitutes and a secondary of the constitutes a thing.	RE: Multiple Multiple Multiple atture of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true. any false information submitted in a document to the Department of State
E V: Effective date, if oth setive date is listed, the diffiling.) E VI: Other provisions, if an accordance constitutes an air I am aware that constitutes a thi	are must be specific and cannot be more than five business days prior to or 90 any. RE: Multiple Murrell mature of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true. any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.) hn Michael Murrell Typed or printed name of signee
E V: Effective date, if oth ctive date is listed, the diffiling.) E VI: Other provisions, if a sign (In accordance constitutes an at I am aware that constitutes a thi	are must be specific and cannot be more than five business days prior to or 90 any. RE: Mature of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true. any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.)

ARTICLE IV-