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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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Effective Date 11115

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COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT: <u>Casa F</u>	Rio LLC. Name of Lir	nited Liability Company	
The enclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please return all corre	espondence concerning this m	satter to the following:	
Christine	zeher	Name of Person	
		Firm/Company	
<u>121 Sap</u>	odilla Drive	Address	
		Addiess	
<u>Islamora</u>	ida, FL 33036	City/State and Zip Code	
zseas@comca	st.net E-mail address: (to be use	d for future annual report notifica	ation)
For further information	on concerning this matter, ple	ase call:	
Christine Zeher Na	at (at (305) 395-8111 Area Code Daytime Te	lephone Number
Enclosed is a check for	or 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)
	uiting Address uistration Section	Street/Courier Add Registration Section	ress

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 27, 2014

CHRISTINE ZEHER 121 SAPODILLA DRIVE ISLAMORADA, FL 33036

SUBJECT: CASA RIO LLC Ref. Number: W14000065204 EVERGRADE CONTRACTOR

We have received your document for CASA RIO LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is 726388.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 914A00022967

Mancas of the Resident

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	• • •
QASA KTO PROPE (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
121 Sapodilla Drive Islamorada, FL 33036	121 Sapodilla Drive Islamorada, FL 33036
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered ag	gent are:
Christine Zeher Name	
121 Sapodilla Drive Florida street address (P.O. Box N	(OT acceptable)
Jslamorada,	FL 33036
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

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"AMBR" = Manager AMBR Christine Zeher 121 Sapodilla Drive Islamorada, FL 33036 (Use attachment if necessary) CLE V: Effective date, if other than the date of filing: January 1, 2015 (OPTIONAL) effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 day te of filing.)	Title:	Name and Address:
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Filing Fees:

constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in s.817.155, F.S.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)