L15000002889

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400267564334

12/22/14--01027--020 **125.00

14 OEC 22 PM L: L9
SECRETARY OF STATE
AND ANASSEE FLORIDA

T. Sinch JAN - 7 2015

COVER LETTER

	of Corporations		
SUBJECT: <u>Cel</u>	lo Group LLC	7.800	
	Name of Lir	nited Liability Company	
The enclosed Arti	cles of Organization and fee(s) as	re submitted for filing.	
Please return all c	orrespondence concerning this m	atter to the following:	
<u>Ores</u>	tes Candelaria Jr		
		Name of Person	
		Firm/Company	
		rimeCompany	
<u>2275</u>	Grove Dr	Address	
Naple	es. FL. 34120 C	ity/State and Zip Code	
ocjr77@gma	ail.com : E-mail address; (to be use	. , d for future annual report notifica	tion)
For further inform	ation concerning this matter, plea		,
Orestes Candel	aria Jr <u>at (:</u> at (: :	239) 877-2811 Area Code Daytime Tel	ephone Number
,		Area Code Daytime rei	ephone Number
Enclosed is a chec	k for the following amount:		
☑ \$125.00 Filing Fe	e □\$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)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addr Registration Section Division of Corporate Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:			
Cello Group LLC (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 of	fice of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
2275 Grove Dr Naples, FL.34120	Same		
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own I another business entity with an active Florida registration The name and the Florida street address of the registered at Orestes Candelaria Jr Name 2275 Grove Dr Florida street address (P.O. Box	Registered Agent. You must designate an individual.) Agent are: ASS EF	34 DEC 22 PM 4: L9	e value de la constante de la
Naples	FL 34120	,	
City Having been named as registered agent and to accept sert the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the oblicable. Chapte Registered Agent's Signati	the appointment as registered agent and agree usef all statutes relating to the proper and complete igations of my position as registered agent as proper 605, F.S	o act in thi performar	s 1ce

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Orestes Candelaria Jr
	2275 Grove Dr
	Naples, FL. 34120
	•
	<u> </u>
	<u> </u>
	S 27
	ino a
	mai e es
	5.4
EV: Effective date, if other than the date of ctive date is listed, the date must be specified.	of filing: 1/1/2015 (OPTIONAL) cific and cannot be more than five business days prior to or 90 d
ctive date is listed, the date must be spec f filing.) E VI: Other provisions, if any.	cific and cannot be more than five business days prior to or 90 d
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any.	cific and cannot be more than five business days prior to or 90 d
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any.	cific and cannot be more than five business days prior to or 90 d
E V: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men	cific and cannot be more than five business days prior to or 90 d
E V: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605)	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony Orestes Candela	nber or an authorized representative of a member0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony Orestes Candela	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony Orestes Candela	nber or an authorized representative of a member0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)

Page 2 of 2