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(Ad	dress)	
(A d	ldress)	
(Cit	ty/State/Zip/Phon	e #)
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(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:	Registration	Section	•	
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SUBJE	CT: LV	hristiana C	asanova L	L. C
		Name of Li	mited Liability Company	
The enc	losed Articles	of Organization and fee(s) a	re submitted for filing.	
Please n	eturn all corre	spondence concerning this m	natter to the following:	
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		112/ Kmooa 1	FL 34224 City/State and Zip Code	
	• •	•	Sity/State and Zip Code	
	Chri	istiana, Casa	d for future annual report notifica	il.com
		E-mail address: (to be use	ed for future annual report notifica	ntion)
For furt	her informatio	n concerning this matter, ple	ase call:	
Α.		•	678	
Chris	stianas.(^η α Sα ἀραλλα — στο	Area Code Daytime Tel	764
<u> </u>	Nan	ne of Person	Area Code Daytime Tel	lenhone Number
	1 (41)	SC OI I CISON	ratea code Buyana re	
Enclose	d is a check fo	or the following amount:		
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₩ \$123.00	Filing Fee	☐\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & Certified Copy	\$160.00 Filing Fee, Certificate of Status &
		Cerunicale of Status	(additional copy is enclosed)	Certified Copy
			(additional copy is circlosed)	(additional copy is enclosed)
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Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



February 2, 2015

CHRISTIANA S. CASANOVA 9203 GRIGGS ROAD, UNIT A-204 ENGLEWOOD, FL 34224

SUBJECT: CHRISTIANA CASANOVA L.L.C.

Ref. Number: W15000007226

We have received your document for CHRISTIANA CASANOVA L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

DOC RECEIVED ON 01/21/15

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 015A00002011

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Christiana Casanova, 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:			
Principal Office Address:	Mailing Address:			
9203 Griggs Rd. Unit A204	9203 Griggs Rd Unit A204			
Englewood, Florida 34224				
Lingicwood, Florida 54224	Englewood, Florida 34224	_	•	
ARTICLE III - Registered Agent, Registered C	Office, & Registered Agent's Signature:	— ividual o)Г	
ARTICLE III - Registered Agent, Registered C	Office, & Registered Agent's Signature: its own Registered Agent. You must designate an ind	— ividual o		
ARTICLE III - Registered Agent, Registered C (The Limited Liability Company cannot serve as i	Office, & Registered Agent's Signature: its own Registered Agent. You must designate an indistration.)	ividual o	2015 FEB	司
ARTICLE III - Registered Agent, Registered C (The Limited Liability Company cannot serve as i another business entity with an active Florida reg	Office, & Registered Agent's Signature: its own Registered Agent. You must designate an indigistration.) gistered agent are:	ividual o	2015 FEB 2	
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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

Christiana S. Casanova. NP-C 9203 Griggs Rd., Unit A204 Englewood. Florida 34224 (Use attachment if necessary) CLE V: Effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 day et of filing.) CLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 605,0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true: 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Christiana S. Casanova. NP-C Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)		<u>Title:</u> "AMBR" = Authorized "MGR" = Manager	Member		Name and Address:	
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing: (OPTIONAL) (OPTIONAL) (Iffective date is listed, the date must be specific and cannot be more than five business days prior to or 90 day e of filing.) CLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document 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 constitutes a third degree felony as provided for in s.817.155, F.S.) Christiana S. Casanova. NP-C Typed or printed name of signee Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent					Christiana S. Casanova, NP-C	
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