

Division of Corporations

LIABILITY 323

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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To:

Division of Corporations.

Fax Number : (850) 617-6381

From:

Account Name : GREENBERG TRAUIG (ORLANDO)

Account Number : 103731001374

Phone : (407) 418-2435

Fax Number : (407) 420-5909

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
Deerfield Cinque Terre, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
DEERFIELD CINQUE TERRE, LLC
a Florida limited liability company**

ARTICLE I - Name: The name of the Limited Liability Company is:
DEERFIELD CINQUE TERRE, LLC

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:

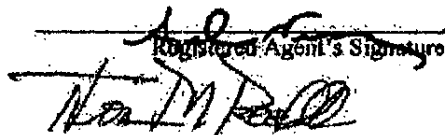
c/o Tupperware Services, Inc.
14901 South Orange Blossom Trail
Orlando, Florida 32837

ARTICLE III - Registered Agent, Registered Office and Registered Agent's Signature:

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

Name: CT Corporation System
Address: 1200 South Pine Island Road, Suite 250
Plantation, Florida 33324

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

**Angel Nunez
Assistant Secretary**

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 section 817.155, F.S.)

Thomas M. Roehlk

Typed or printed name of signor

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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