

L16000020065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

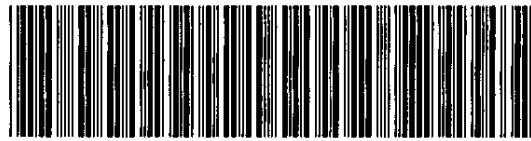
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2/2/16

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Biscayne Capital Property Holdings, Llc  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph Natoli

Name of Person

Firm/Company

310 S Parkway

Address

Golden Beach, FL 33160

City/State and Zip Code

jkknatoli@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristopher Natoli

617

640-9891

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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)

**Mailing Address**

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

**Street Address**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Biscayne Capital Property Holdings, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

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ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

14901 NW 42ND AVE

OPA LOCKA AIRPORT

OPA-LOCKA, FL 33054

Mailing Address:

14901 NW 42ND AVE

OPA LOCKA AIRPORT

OPA-LOCKA, FL 33054

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Joseph Natoli

Name

14901 NW 42ND AVE

Florida street address (P.O. Box **NOT** acceptable)

OPA-LOCKA

FL

33054

City

State

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.*



POA

Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Joseph Natoli,  
as Trustee of the Joseph Natoli Revocable Trust  
310 South Parkway, Golden Beach, FL 33160

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

 POA

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

Kris Natoli, POA

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)

\$ 5.00 Certificate of Status (Optional)

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**JOSEPH NATOLI**  
**DURABLE POWER OF ATTORNEY**

I, **JOSEPH NATOLI**, of Miami-Dade County, Florida, have made, constituted and appointed, and by these presents do make, constitute and appoint my son **KRISTOPHER NATOLI** my true and lawful attorney-in-fact (sometimes referred to hereunder as my "agent"), and my daughter **KIRSTAN NATOLI** as my alternate agent, for me and in my name, place and stead, to do any lawful act for me and in my name, including, but not limited to, the following:

- (1) To transfer, convert, endorse, sell, assign, set over and deliver any and all shares of stock, bonds, debentures, notes, subscription warrants, stock purchase warrants, evidences of indebtedness, or other securities now or hereafter standing in my name or owned by me and to make, execute and deliver any and all written instruments of assignment and transfer necessary or proper to effectuate the authority hereby conferred; and
- (2) To ask, demand, sue for, collect and receive all sums of money, dividends, interest, payments on accounts of debts and legacies and all property now due or which may hereafter become due and owing to me, and give good and valid receipts and discharges for such payment; to buy and sell securities of all kinds in my name and for my account and at such prices as such attorney, in the exercise of absolute discretion, shall deem appropriate; and
- (3) To vote any corporate securities for any purpose; to exercise or sell any subscription or conversion rights; to consent to and join in or oppose any voting trusts, reorganizations, consolidations, mergers, foreclosures and liquidations and in connection therewith to deposit securities and accept and hold other securities or property received therefor; and
- (4) To conduct investment transactions as provided in s. 709.2208(2), Florida Statutes; and
- (5) To manage any and all property, real or personal, tangible or intangible, wherever situated, to sell, convey, assign, mortgage, encumber or otherwise transfer the same; to lease same; to foreclose mortgages or enforce any other rights with respect to the same; to take title to the same in my name; and to execute, acknowledge and deliver deeds, bills of sale, mortgages, releases, satisfactions and any other instruments relating to the same which such attorney, in the exercise of absolute discretion, shall deem appropriate; and
- (6) To do business with banks and brokers, and particularly to endorse all checks and drafts made payable to my order and collect the proceeds and to sign in my name checks on all accounts standing in my name, and to withdraw funds from said accounts, to open accounts in my name or in the name of my agent, as my attorney-in-fact; and

- (7) To conduct banking transactions as provided in s. 709.2208(1), Florida Statutes; and
- (8) To borrow money from any lender, personal or corporate, and to extend or renew any existing indebtedness of mine; and
- (9) To compromise, contest, prosecute or abandon claims in favor of or against me; and
- (10) To have access to any safe deposit box to which I have access; and
- (11) To make such payments and expenditures as my agent shall, in the exercise of absolute discretion determine to be necessary in connection with any of the foregoing matters or with the administration of my affairs; and
- (12) ~~INITIAL ( ) To manage any IRA or other retirement plan assets, including to sell and reinvest assets, to transfer such assets between institutional trustees or custodians, to open retirement accounts in my name, to deal with tax liability matters, and to determine and make beneficiary distributions (but not to change beneficiary designations); and~~
- (13) INITIAL (   *mn*   ) To make, sign and verify income, gift or other tax returns and tax filings, including to make relevant tax elections, , to prepare and file extension requests or amendments, and to enter into settlement agreements, and to represent me in all tax matters before any office of the Internal Revenue Service or any other taxing authority, within the limitations of the applicable law; and
- (14) INITIAL (   *mn*   ) To disclaim or renounce any interest in property or any power of appointment held by me; and
- (15) To take care of, contract for, make arrangements for and make financial commitments for, on my behalf, the medical care and attention of myself, including, without limiting the foregoing, to engage doctors and nurses, to provide hospitalization, consent to operations, call ambulances and provide any required consents to medication and any other medical procedures, provided, however, if at any time a Health Care Surrogate is acting on my behalf, my agent shall cooperate with, follow the directives of and (using my property) provide any necessary financial assistance to such Health Care Surrogate and I hereby designate my agent as a "personal representative" of mine for health care information and authorize the release of all medical and other information relating to my health and healthcare, including all my "individually identifiable health information" and any "protected health information" (as those terms are defined in the regulations under HIPAA at 45 CFR § 160.103), to my agent so that my agent can make informed decisions regarding my care; and
- (16) To transfer assets to the then acting Trustee of the Joseph Natoli Revocable Trust under Declaration of Trust executed by me, dated November 25, 2015, as Settlor and Trustee, as the same may be amended

