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## COVER LETTER

	Registration Section Division of Corporations	
SURIEC	ELSTON RICCI JULIANO OF GA	ARDEN MANOR, LLC
SO DO ESC	T:Name of I	cimited Liability Company
The enclo	osed Articles of Organization and fee(s)	are submitted for filing.
Please ret	turn all correspondence concerning this	matter to the following:
	JAMES E WILLIS	
		Name of Person
		Firm/Company
	851 5TH AVE N SUITE 301	
		Address
	NAPLES FL 34102	
	JWILLISATTY@GMAIL.COM	City/State and Zip Code
	E-mail address: (to be use	ed for future annual report notification)
For further	information concerning this matter, plea	se call:
		239 435-0094
	Name of Person	Area Code Daytime Telephone Number
Enclosed:	is a check for the following amount:	
\$125.00 F	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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

(Must end	with the words "Limited	Liability Company	y, "L.L.C.," or "LLC.")	
RTICLE II - Address: he mailing address and street a	ddwyga of the maineimal ex	ffice of the Limited	Liskility Commony in	
<b>O</b>	• •	ince of the Emilie	Liaomity Company is.	
<u>Princip</u>	al Office Address:		Mailing Address:	
461 11TH AVENUE	SOUTH	461	11TH AVENUE SOUTH	
NAPLES, FL 34102			PLES, FL 34102	
The Limited Liability Company	cannot serve as its own	Registered Agent.	nt's Signature: You must designate an individual or	
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registration address of the registered	Registered Agent. n.) agent are:		16 FED
The Limited Liability Company mother business entity with an a	cannot serve as its own active Florida registration	Registered Agent. n.) agent are:	You must designate an individual or	16 150
ARTICLE III - Registered Age The Limited Liability Company mother business entity with an a	cannot serve as its own active Florida registration address of the registered	Registered Agent. n.) agent are: LIANO Name	You must designate an individual or	18 FED 0
The Limited Liability Company mother business entity with an a	cannot serve as its own active Florida registration address of the registered CATHERINE M. JUI	Registered Agent. n.) agent are: LIANO Name SOUTH	You must designate an individual or	18 FED 0
The Limited Liability Company mother business entity with an a	cannot serve as its own active Florida registration address of the registered CATHERINE M. JUI	Registered Agent. n.) agent are: LIANO Name SOUTH	You must designate an individual or	10100

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..

(CONTINUED)

Page 1 of 2

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

"MGR" - Manager MGR  CATHERINE M. JULIANO  461 11TH AVENUE SOUTH NAPLES FL 34102  LINDA ELSTON 26 BRITTANY DRIVE MIDDLETOWN, NY 10940  MGR  MARIANNE RICCI 237 SECOND STREET STOUGHTON, MA 02072  (Use attachment if necessary)  LE V: Effective date, if other than the date of filing: (OPTIONAL)  fective date is listed, the date must be specific and cannot be more than five business days prior to or 90 day of filing.)  flet date inserted in this block does not meet the applicable statutory filing requirements, this date will not be iment's effective date on the Department of State's records.  LE VI: Other provisions, if any. of the Managers named herein shall have have authority to act on behalf of the limited liability company, and shall be binding on the limited liability company and its managers and members in respect to all third parties with the limited liability company.  REOURED SIGNATURE:  Signature of a member or an authoritzed 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 in a constitutes a third degree felony as provided for in s.817.155, F.S.  ATHERINE M. July and Typed or printed name of signee  Filing Fees:  \$ 30.00 Certified Copy (Optional)	Title: "AMBR" = Authorized Member	Name and Address;
MGR  CATHERINE M. JULIANO 461 11TH AVENUE SOUTH NAPLES FL 34102  LINDA ELSTON 26 BRITTANY DRIVE MIDDLETOWN, NY 10940  MGR  MARIANNE RICCI 237 SECOND STREET STOUGHTON, MA 02072  (Use attachment if necessary)  LE V: Effective date, if other than the date of filing:  (OPTIONAL)  rective date is listed, the date must be specific and cannot be more than five business days prior to or 90 day of filing.)  f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be imment's effective date on the Department of State's records.  LE VI: Other provisions, if any, of the Managers named herein shall have have authority to act on behalf of the limited liability company, and shall be binding on the limited liability company and its managers and members in respect to all third parties with the limited liability company.  REOUIRED SIGNATURE:  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 fishe information submitted in a document to the Departugent of State constitutes a third degree felony as provided for in s.817.155, F.S.  ATHER ME JULICAND  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)		
MGR  LINDA ELSTON 26 BRITTANY DRIVE MIDDLETOWN, NY 10940  MARIANNE RICCI 237 SECOND STREET STOUGHTON, MA 02072  (Use attachment if necessary)  LE V: Effective date, if other than the date of filing:  (OPTIONAL)  feetive date is listed, the date must be specific and cannot be more than five business days prior to or 90 day of filing.)  f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be imment's effective date on the Department of State's records.  LE VI: Other provisions, if any.  of the Managers named herein shall have have authority to act on behalf of the limited liability company, and shall be binding on the limited liability company and its managers and members in respect to all third parties with the limited liability company.  REOURED SIGNATURE:  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 Departurent of the constitutes a third degree felony as provided for in s.817.155, F.S.  ATURE W July and  Typed or printed name of signee  Filling Fees:  \$ 30.00 Certified Copy (Optional)		CATHERINE M. JULIANO
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MGR  LINDA ELSTON 26 BRITTANY DRIVE MIDDLETOWN, NY 10940  MARIANNE RICCI 237 SECOND STREET STOUGHTON, MA 02072  (Use attachment if necessary)  (Use attachment if necessary)  LE V: Effective date, if other than the date of filing:  (OPTIONAL)  Fective date is listed, the date must be specific and cannot be more than five business days prior to or 90 day of filing.)  for the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ament's effective date on the Department of State's records.  LE VI: Other provisions, if any.  10 of the Managers named herein shall have have authority to act on behalf of the limited liability company, and shall be binding on the limited liability company and its managers and members in respect to all third parties with the limited liability company.  REOURED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605, 2003 (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.  Attender M Juliand  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)		
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(Use attachment if necessary)  LE V: Effective date, if other than the date of filing:  [Coptional]  (Coptional)	NCB	MADIANNE DICCU
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