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## **COVER LETTER**

	egistration Section livision of Corporations
SUBJECT	Arango Properties, LLC
SUBJECT	Name of Limited Liability Company
The enclos	sed Articles of Organization and fee(s) are submitted for filing.
Please retu	irn all correspondence concerning this matter to the following:
	F. Parker Lawrence, Esq.
	Name of Person
	F. Parker Lawrence, P.A.
	Firm/Company
	3720 NW 43rd St, Ste 101, Gainesville FL 32606
	Address
	City/State and Zip Code christina.arango@gmail.com
-	E-mail address: (to be used for future annual report notification)
For further in	nformation concerning this matter, please call:
	F. Parker Lawrence 352 373-416()
	Name of Person Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:
S125.00 Fi	Certificate of Status  S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
	Mailino Address Street Address

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

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: The name of the Limited Liability Compan	y is:	
Arango Properties, LLC		<del></del>
(Must end with the w	ords "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	he principal office o	f the Limited Liability Company is:
Principal Office A	Address:	Mailing Address:
9573 SW 101st Ave		5745 SW 75th Street, No. 149
Gainesville, FL 32608		Gainesville, FL 32608
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot set another business entity with an active Florida street address of	rve as its own Registida registration.)	ered Agent. You must designate an individual or
Christin	na Arango	
	Nam	2
<u>9573 SV</u>	W 101st Avenue	
Florida	street address (P.O.	Box NOT acceptable)
Gainec	ille, FL 32608	

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. 1. 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..

State

City

7-7 MAO
Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

Page 1 of 2

l'itle:	Name and Address:
AMBR" = Authorized Member	<del></del>
MGR" = Manager	
MGR	Juan G. Arango
	9573 SW 101st Ave
	Gainesville, FL 32608
MGR	Christina Arango
	9573 SW 101st Ave
	Gainesville, FL 32608
<del></del>	
<del></del>	
V: Effective date, if other than the d	ate of filing: Filing Date (OPTIONAL) specific and cannot be more than five business days prior to or 90
filing.)	ot meet the applicable statutory filing requirements, this date will not
V: Effective date, if other than the detive date is listed, the date must be filing.) the date inserted in this block does not ent's effective date on the Department VI: Other provisions, if any.	ot meet the applicable statutory filing requirements, this date will not ent of State's records.
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V: Effective date, if other than the dive date is listed, the date must be filing.) ne date inserted in this block does not ent's effective date on the Departme VI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a This document is exel am aware that any faconstitutes a third degree	pember or an authorized representative of a member.  cuted in accordance with section 605.0203 (1) (b), Florida Statutes.  alse information submitted in a document to the Department of State  gree felony as provided for in s.817.155, F.S.