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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Neil Ferrentino 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:
Neil Ferrentino Name of Person
Neil Ferrentino LLC Firm/Company
1842 Concordia Lake Circle Apt. 1103
Cape Coral, FL 33909 City/State and Zip Code
neil. ferrenting Cyahoo. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Neil Ferrentino at (339) 878-7782 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee & Certificate of Status □\$130.00 Filing Fee & Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	₹.0	مند.	
ARTICLE 1 - Name: The name of the Limited Liability Company is:	EUNAHA LLAHA	6 НАҮ -	et signi.
Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address:	SSEE FLORIDA	-2 PH 1: 35	granden granden granden granden granden
The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: (Same) — Mailing Address: 1842 Concordia Lake Circle Pot 1 Cape Coral, Florida 33909	10	3	
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 ianother business entity with an active Florida registration.)	individ	ual or	
The name and the Florida street address of the registered agent are:			
Tropical Builders and Home	In	spe	ctions
Florida street address (P.O. Box NOT acceptable)			
Cape Coral FL 33993			

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 Senature (SEQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Neil Ferrentino 1842 Concordia Lakecircle Cape Coral, FL 33909
an effective date is listed, the date must be sp	e of filing:
ATICLE V: Effective date, if other than the date an effective date is listed, the date must be specified of filing.)	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days after
ATICLE V: Effective date, if other than the date an effective date is listed, the date must be specified of filing.) ATICLE VI: Other provisions, if any.	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days afte
ATICLE V: Effective date, if other than the date an effective date is listed, the date must be specified of filing.) ATICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	pecific and cannot be more than five business days prior to or 90 days afte
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be special date of filing.) RTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 605.02 constitutes an affirmation under the penalties	ember or an authorized representative of a member.
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be special date of filing.) RTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 605.02	ember or an authorized representative of a member. Of perjury that the facts stated herein are true. The property of the property of the property of the perjury that the facts stated herein are true. The property of the property of the property of the perjury that the facts stated herein are true.

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