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## COVER LETTER

	egistration Section ivision of Corporations			
esin in zer	404 Management, LLC			
SUBJECT		Limited Liabili	ty Company	
The enclose	ed Articles of Organization and fee(s)	are submitted	for filing.	
Please retu	rn all correspondence concerning this	matter to the fi	ollowing:	
	Alfred D Morana			
		Name of	Person	
		Firm/Co	npany	
	3561 Bellington Dr			
	Page 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Addre		
	Orlando, Florida 32835			
,		City/State and	l Zip Code	
	nomeandbusiness@bellsouth.net  E-mail address: (to be us	sed for future a	nnual report notification	1)
For further in	formation concerning this matter, ple	ase call:	-	
	Alfred D Morana	305	992-0812	
	Name of Person	\ <del></del>	)	Number
Enclosed is	a check for the following amount:			
\$125.00 Fi	_	Certific	0 Filing Fee & d Copy l 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 Corporation  Clifton Building	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compa	any is:			
404 Management, LLC (Must end with the	words "Limited	Liability Company	y, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal of	fice of the Limited	Liability Company is:	
Principal Office	Address:		Mailing Add	ress:
3561 Bellington Dr Orlando, Florida 32835			Bellington Dr ndo, Florida 32835	
ARTICLE III - Registered Agent, Registered Agent, Registered Limited Liability Company cannot support another business entity with an active Florida street address of Alfred	serve as its own l orida registration	Registered Agent. '		16 JUN 15 AM 10: 42
Ame	1 D Morana	Name	**************************************	SS. 5
				居 王
<del></del>	Bellington Dr	(I) O. Day NOT	, acceptable)	E 0 5
FIORE	ia street address	(P.O. Box <u>NOT</u> ac	cceptable)	<b> </b>
<u>Orland</u>	do, Florida 3283	5		A
	City	State	Zip	
Having been named as registered agent and place designated in this certificate, I hereby further agree to comply with the provisions and familiar with and accept the obligations	accept the appo of all statutes rei	intment as registere lating to the proper s registered agent	ed <mark>agent and agree</mark> to act and complete performan	t in this capacity. Ince of my duties, and I

Page 1 of 2

Jack Committee Committee

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/	к				. IV.	_

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Alfred D Morana 3561 Bellington Dr Orlando, Florida 32835
AMBR .	Maria Cristina Bilcher Morana 3561 Bellington Dr Orlando, Florida 32835
<del></del>	
If an effective date is listed, the date must be sp he date of filing.)	of filing:
ARTICLE VI: Other provisions, if any.	
	enther or an authorized representative of a member of the din accordance with section 605.0203 (1) (b), Florida Falute
I am aware that any false	e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.

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)