

Division of Corporations

Page 1 of 2

L16000183712

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000244083 3)))



H16000244083ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : AGENTS AND CORPORATIONS, INC.
Account Number : I20010000112
Phone : (302) 575-0875
Fax Number : (302) 575-1642

16 SEP 30 AM 10:23

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FILED
16 SEP 30 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
PERRY J. VENTRO INTERIORS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

D O'KEEFE

OCT 04 2016

*Agents and corporations
is registered in the
state of
F-0100000224/
PLEASE PROCESS TO FL
9/30/16
THANK YOU*

850-617-6381

10/9/2016 8:57:38 AM

PAGE

17001

Fax Server



October 3, 2016

FLORIDA DEPARTMENT OF STATE

Division of Corporations

AGENTS AND CORPORATIONS, INC.

SUBJECT: PERRY J. VENTRO INTERIORS LLC

REF: W16000067613

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE
Regulatory Specialist II

FAX Aud. #: H16000244083
Letter Number: 516A00021141

FILED
16 SEP 30 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H16000244083 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PERRY J. VENTRO INTERIORS LLC

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

ARTICLE II - Address:

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

Principal Office Address

1283 EGRETS LANDING
#103
NAPLES, FL 34108

Mailing Address:

1283 EGRETS LANDING #103
NAPLES, FL 34108

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:

AGENTS AND CORPORATIONS, INC.

Name

300 FIFTH AVENUE SOUTH SUITE 101-330

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

NAPLES

City

FL34012

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.

Agents and Corporations, Inc.

By

Registered Agent's Signature (Required)

Brian C. Crumford, Asst. Secretary

(CONTINUED)

Page 1 of 2

FILED
16 SEP 30 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV:

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

Title:

"AMTR" - Authorized Member

"MGR" - Manager

Name and Address:

PERRY J. VENTRO
1283 EGGETTS LANDING #103
NAPLES, FL 34108

MGR

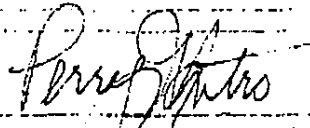
PERRY J. VENTRO

(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE.



Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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, 1 S.)

PERRY J. VENTRO

Typed or printed name of signer

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)

Page 2 of 2

FILED
16 SEP 30 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA