

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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Account Name

: MORAITIS, COFAR, KARNEY & MORAITIS

Account Number : I19990000033

Phone Fax Number : (954)563-4163 : (954)563-5913

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

Emmil Address:

hperry@mcklaw.com

FLORIDA LIMITED LIABILITY CO. LUNA ROSA APARTMENTS, LLC

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION

OF

LUNA ROSA APARTMENTS, LLC

A FLORIDA LIMITED LIABILITY COMPANY

16 OCT 13 PH 1: 14
SEGNATANT OF STATE
TALUAHASSEE, FLORIDA

ARTICLE I - Name: The name of the Limited Liability Company is:

LUNA ROSA APARTMENTS, LLC, a Florida limited liability company.

ARTICLE II - Street Address of Principal Office: The street address of the principal office of the Limited Liability Company is:

263 Princess Palm Road Boca Raton, FL 33432

ARTICLE III - Mailing Address of Principal Office: The mailing address of the principal office of the Limited Liability Company is:

263 Princess Palm Road Boca Raton, FL 33432

ARTICLE IV - Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Robert Guarini 263 Princess Palm Road Boca Raton, FL 33432

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, Florida Statutes.

Robert Guarini, Registered Agent

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ARTI	CLE V	- Man	agement:

The Limited Liability Company is to be managed by one or more managers and the name of the initial manager is Robert Guarini.

Signature of a member or an authorized representative of a member.

Robert Guarini, Manager

(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 Section 817.155, Florida Statutes.)

Filing Fees:

\$ 100.00 - Filing Fee for Articles of Organization

\$25.00 - Designation of Registered Agent

\$ 30.00 - Certified Copy (aptional)

\$ 5.00 - Certificate of Status (optional)

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