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COVER LETTER

SUBJECT: The enclosed Artic Please return all co Jeffrey Starr C 105 Ei Roseia jpittarde For further informat	Name of Limited Liability Company Cles of Organization and fee(s) are submitted for filing. Orrespondence concerning this matter to the following: y R. Pittard, Esq. Name of Person Gern Davison & Rubin, PC Firm/Company isenhower Parkway, Suite 401
The enclosed Artic Please return all co Jeffrey Starr C 105 Ei Roseia jpittarde	cles of Organization and fee(s) are submitted for filing. orrespondence concerning this matter to the following: y R. Pittard, Esq. Name of Person Gern Davison & Rubin, PC Firm/Company
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Rosela jpittarde	isenhower Parkway, Suite 401
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For further informat	and, NJ 07068
For further informat	City/State and Zip Code @starrgern.com
	E-mail address: (to be used for future annual report notification)
leffroy	ion concerning this matter, please call:
Jenney	Pittard 973 403-9200 at ()
<u> </u>	Name of Person Area Code Daytime Telephone Number
Enclosed is a check	k for the following amount:
\$125,00 Filing Fee	<u> </u>
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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

The name of the Limited Liability	y Company is:			
530 Art Lane, LLC (Must end v	vith the words "Limited	Liability Compa	ny, "L.L.C.," or "LLC.")	_
ARTICLE II - Address: The mailing address and street ad	ldress of the principal o	ffice of the Limi	ed Liability Company is:	
<u>Principa</u>	ll Office Address:		Mailing Address:	
138 6TH Avenue Sou	ıth		88 6TH Avenue South	_
Naples, FL 34102			aples, FL 34102	_
The name and the Florida street a	Helen Mecca 138 6th Avenue Sou	Name		
	Florida street addres		acceptable)	
	Naples	FL	34102	
	City	State	Zip	
place designated in this certificate, further agree to comply with the pro	I hereby accept the app ovisions of all statutes re	ointment as regis elating to the pro	the above stated limited liability company a lered agent and agree to act in this capacity per and complete performance of my duties, nt as provided for in Chapter 605, F.S	y. I

(CONTINUED)

Page 1 of 2

<u>[itle:</u> 'AMBB" = A	uthorized Member	Name and Address:
MGR" = Ma		
MOD		138 6TH Avenue South
	· 	Naples, FL 34102
		
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EV: Effective exterior date is leffiling.) the date inserting entry is effective.	e date, if other than the date of isted, the date must be speciated in this block does not me we date on the Department of ovisions, if any.	ific and cannot be more than five business days prior to or 90 et the applicable statutory filing requirements, this date will no State's records.
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