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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Tor

Division of Corporations

Pax Number

: (850)617-6381

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone: (561)694-8107

Fax Number :

: (561)694-1639

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

Email Address:

FLORIDA LIMITED LIABILITY CO.

Naples 16514, LLC

	<u></u>
Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00



Electronic Filing Menu

Corporate Filing Menu

Help

	COVER LETTER	
	New Filing Section Division of Corporations	
SUBJEC	NAPLES 16514, LLC	
CONEC	Name of Limited Liability Company	
The enclo	sed Articles of Organization and fee(s) are submitted for filing.	
Piense ret	num all correspondence concerning this matter to the following:	
	JOHN GENTILE	
	Name of Person	
	NAPLES 16514, LLC	
	Firm/Company	
	3 SEELEY STREET	
	Address	
	BROOKLYN NY 11218	
	City/State and Zip Code johngentile44@me.com	
	E-mail address: (to be used for future annual report notification)	
For further	information concerning this matter, please call:	
	JOHN GENTILE 718 435-6505	
	Name of Person Area Code Daytime Telephone Number	
Enclosed	is a check for the following amount:	
] \$125.00 f	Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	d)
	Mailing Address New Filling Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address New Filing Section Division of Corporations CHRon Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FURFILORIDA LIMITED LIABILITY COMPANY

ART	lCi	Æ.	i -	Na	me:

The name of the Limited Liability Company is:

NAPLES 16514, LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

City

Principal Office Address:

Mailing Address:

3 SEELEY STREET BROOKLYN NEW YORK 11218

3 SEELEY STREET BROOKLYN NEW YORK 11218

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:

Corporate Creations Network Inc. Name 11380 Prosperity Farms Road #221 E Florida street address (P.O. Box NOT acceptable) Palm Beach Gardens

Having been named an registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby occupt 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 for am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered

(CONTINUED)

• • •

Title:	1 134 1	Name and Address:			
"AMBR" = Aud "MGR" = Mana					
MCR	şu.	MYMNGR LLC			
		3 SEELEY STREET			
		BROOKLYN NY 11218			
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