

04/21/2020 16:56 T-04:00 TO: +18506176381 FROM: 9545635913

4/21/2020

Division of Corporations

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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2020 APR 21 PM 4:55

TO: 18506176381

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

From:

Account Name : MORAITIS, COFAR, KARNEY, MORAITIS & QUAILEY  
Account Number : I19990000033  
Phone : (954)563-4163  
Fax Number : (954)563-5913

20 APR 21 AM 7:58

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

Email Address: hperry@mcklaw.com

FLORIDA LIMITED LIABILITY CO.  
CAVALINO MOTORS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

J DENNIS  
APR 22 2020

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

20 APR 21 AM 7:58

ARTICLE I - Name:

The name of the Limited Liability Company is:

Cavalino Motors, 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:

Principal Office Address:

Mailing Address:

305 Country Club Road  
South Glastonbury, CT 06073

305 Country Club Road  
South Glastonbury, CT 06073

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:

Aldo Stark

Name

2301 NE 37th Drive

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

Fort Lauderdale

FL

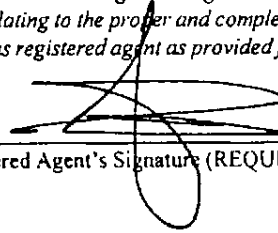
33308

City

State

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..*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

21.

20 APR 21 AM 7:52

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

AMBR

Giuseppe Capasso  
305 Country Club Road  
South Glastonbury, CT 06073

MGR

Aldo Stark  
2301 NE 37th Drive  
Fort Lauderdale, FL 33308

(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.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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, F.S.

Aldo M Stark

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)