Division of Corporations https://efile.sunbiz.org/scripts/efilcovr.exe

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> > (((H200001921843)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : DAVID L. MACKAY ATTORNEY, PA

Account Number : 120060000116 : (352)237-3800 Fax Number : (800)556-5792

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

<u>yordantrau</u>

FLORIDA LIMITED LIABILITY CO.

NAJU Properties, LLC

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

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Corporate Filing Menu

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(((H20000192184 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

NAJU Properties, LLC		 		
(Must contain	in the words "Limited I	Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	dress of the principal o	ffice of the Limited	Liability Company is:	
<u>Principa</u>	l Office Address:		Mailing Address:	
929 N US Hwy 27/44	1, Unit 102	PO F	Box 3667	
Lady Lake, FL 32159		Belle	eview, FL 34421	
(The Limited Liability Company of another business entity with an ac The name and the Florida street an	cannot serve as its own ctive Florida registratio	п.)	You must designate an individual or	
another business entity with an ac	cannot serve as its own ctive Florida registratio	Registered Agent. ' n.)		
another business entity with an ac	cannot serve as its own ctive Florida registration ddress of the registered	Registered Agent. \ n.) agent are: Name		
another business entity with an ac	cannot serve as its own ctive Florida registration ddress of the registered Juan C. Yordan	Registered Agent. 'n.) l agent are: Name	You must designate an individual or	
another business entity with an ac	cannot serve as its own crive Florida registration ddress of the registered Juan C. Yordan 929 N US Hwy 27/44	Registered Agent. 'n.) l agent are: Name	You must designate an individual or	
another business entity with an ac	cannot serve as its own ctive Florida registration ddress of the registered Juan C. Yordan 929 N US Hwy 27/44 Florida street address	Registered Agent. Your agent are: Name 11. Unit 102 s (P.O. Box NOT according to the second s	You must designate an individual or	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

(((H20000192184 3)))

BR" = Authorized Member R" = Manager GR	Juan C. Yordan
•	Juan C. Yordan
<u>GR</u>	Juan C. Yordan
	929 N US Hwy 27/441. Unit 102
	Ladv Lake, FL 32159
	
e date is listed, the date must be speng.) late inserted in this block does not π	of filing:
Effective date, if other than the date is date is listed, the date must be speng.) late inserted in this block does not make the date on the Department of Other provisions, if any.	ecific and cannot be more than five business days prior to or 90 d neet the applicable statutory filing requirements, this date will not b
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\$ 5.00 Certificate of Status (Optional)