## L21000158762

1		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		ļ
	<del></del>	

Office Use Only



200361645962

03/12/21--01017--002 \*\*160.00

## COVER LETTER

	New Filing Sect Division of Corp					
	LILANDDO	DM LLC				
SUBJEC	.1:	Name of Li	mited Liabi	lity Company		
The encl	osed Articles of C	Organization and fee(s) a	ire submitte	d for filing.		
Please re	turn all correspo	ndence concerning this n	natter to the	following:		
	Dominick Int	artaglia				
			Name o	of Person		
	LILANDDO	M LLC				
			Firm/C	Company		
	130 Beach Si	ummit Court				. 7[
			Adı	dress		= -
	Jupiter Floric	la/ 33477				
			City/State	ınd Zip Code		, ·
	dom.intar@gr	nail.com E-mail address: (to be uso	of for farms	connect report notificat		81:31.1
				amaar report notiness.	,	18
For furthe	r information co	ncerning this matter, plea				
	Dominick Int	artaglia at (	201 	9194800 )		
	Nam	ne of Person	Area Code	Daytime Telephor	ie Number	
Enclose	d is a check for t	he following amount:				
□\$125	.00 Filing Fee	□S130.00 Filing Fee Certificate of Status	Cert	155.00 Filing Fee & ified Copy onal copy is enclosed)	Certificate of Certificate of Certified Co (additional cor	of Status & py
	New F Divisi	ng Address Filing Section on of Corporations Box 6327		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre	assee	

Tallahassee, FL 32314

Tallahassee, Fl. 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LILANDD	OM LLC			
(	Must contain the words "Limited I	.iability Company. "l	L.L.C.," or "LLC.")	
ARTICLE II - Addre The mailing address ar	ss: ad street address of the principal of	ffice of the Limited L	iability Company is:	
	Principal Office Address:		Mailing Address:	
	Summit Court		each Summit Court	
Jupiter Flo	orida	<u>Jupite</u> 33477	r Florida	
33477			<del></del> .	
	y with an active Florida registrationida street address of the registered	n.)	ou must designate an individ	-
	y with an active Florida registratio	n.) Lagent are:		-
	y with an active Florida registration ida street address of the registered	n.) Lagent are:		2.711.7.72
	y with an active Florida registration ida street address of the registered	n.) Lagent are: Name		2.711.7.72
	y with an active Florida registration rida street address of the registered Dominick Intartaglia	n.) Lagent are: Name		-
	y with an active Florida registration rida street address of the registered Dominick Intartaglia  130 Beach Summit C	n.) Lagent are: Name		2.711.7.72
	y with an active Florida registration rida street address of the registered Dominick Intartaglia  130 Beach Summit Compared Florida street addres	n.) l agent are: Name Court s (P.O. Box <u>NOT</u> ac	ceptable)	2711:312 119:1

(CONTINUED)

Title:  "AMBR" = Authorized Member  "MGR" = Manager  AMBR  AMBR	Dominick A Intartaglia  130 Beach Summit Court  Juniter FL 33477	
AMBR	130 Beach Summit Court	
	130 Beach Summit Court	
AMBR	Juniter FL 33477	
AMBR		
AMDIC	Lillian Intartaglia	
	130 Beach Summit Court Juoiter FL 33477	
	Juotter PL 35477	
(Use attachment if necessary)		
and the state of t	ore of filing: . (OPTIONAL)	
ICLE V: Effective date, if other than the date	ite of filling.	
n effective date is fisted. The date inust be	specific and cannot be more than five business days prior to or $90_{ m pc}$	days
	nte of filing:	
late of filing.) e: If the date inserted in this block does no	of meet the applicable statutory filing requirements, this date will not	
late of filing.) e: If the date inserted in this block does no	of meet the applicable statutory filing requirements, this date will not	
<pre>late of filing.) e: If the date inserted in this block does no document's effective date on the Departme</pre>	of meet the applicable statutory filing requirements, this date will not	
<pre>late of filing.) e: If the date inserted in this block does no document's effective date on the Departme</pre>	of meet the applicable statutory filing requirements, this date will not	
<pre>ate of filing.) e: If the date inserted in this block does no locument's effective date on the Departme</pre>	of meet the applicable statutory filing requirements, this date will not	
late of filing.)  e: If the date inserted in this block does not locument's effective date on the Department.	of meet the applicable statutory filing requirements, this date will not	
late of filing.) e: If the date inserted in this block does no document's effective date on the Departme TCLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	of meet the applicable statutory filing requirements, this date will not not of State's records.	
late of filing.) e: If the date inserted in this block does no document's effective date on the Departme TCLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	of meet the applicable statutory filing requirements, this date will not not of State's records.	
late of filing.) e: If the date inserted in this block does not document's effective date on the Departme TCLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	nt of State's records.  Munich State's records.  Manuel State's records.  Manuel State's records.	
REQUIRED SIGNATURE:  Signature of a This document is extended.	nt of State's records.  Mutuck Intalagles  member or an authorized representative of a member.  secured in accordance with section 605.0203 (1) (b), Florida Statutes.	
late of filing.) e: If the date inserted in this block does not document's effective date on the Departme TCLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a This document is exert an aware that any feet.	member or an authorized representative of a member.  ecuted in accordance with section 605.0203 (1) (b). Florida Statutes.  also information submitted in a document to the Department of State	
REOUIRED SIGNATURE:  Signature of a This document is exerted in the Department of a This document is exerted in the Department of a This document is exerted in this block does not document is exerted.	nt of State's records.  Mutuck Intalagles  member or an authorized representative of a member.  secured in accordance with section 605.0203 (1) (b), Florida Statutes.	

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)