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# COVER LETTER

	New Filing Section Division of Corporations				} ~ {	9092 MAR 28
	·	_			1.	
SUBJEC	6866 STERLING GREENS, LLC				<b>;</b> •	55 E
		Limited Liab	ility Company			ETH_ED
The enclo	osed Articles of Organization and feets	s) are submitte	d for filing.		Grand Carlo	PH 1: 20
Please re	turn all correspondence concerning thi	s matter to the	following:			0
	Kevin R Lottes, Esq					
	···	Name o	of Person			
	Lottes Law Group, PLLC					
		Firm/C	ompany			_
	9132 Strada Place, Suite 207					
		Ado	lress	_		_
	Naples, FL 34108					
		City/State a	nd Zip Code		_	<del></del>
	aldo@naplesproperty.info			_		_
	E-mail address: (to be i	ised for future	annual report notificat	ion)		
For further	information concerning this matter, p	lease call:				
	Kevin R. Lottes	239	552-4114			
	Name of Person	Area Code	Daytime Telephor	ne Number	-	
Enclosed	is a check for the following amount:					
	00 Filing Fee ☐ \$130.00 Filing Fe Certificate of Status	: Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	□\$160.06 Certificate Certified ( (additional c	e of Status Copy	&
	Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	Company is:				
6866 STERLING GR	EENS, LLC				
(Must conta	in the words "Limited	Liability Company	, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street ad	dress of the principal c	office of the Limite	d Liability Company is:		
<u>Principa</u>	Principal Office Address:		Mailing Address:		
6866SterlingGreensDrive#101		686	6866 Sterling Greens Drive #101		
Naples,FL 34104		Na	Naples,FL 34104		
ARTICLE III - Registered Ages (The Limited Liability Company of another business entity with an act The name and the Florida street a	cannot serve as its own ctive Florida registration	n Registered Agent. on.)	ent's Signature: You must designate an individual or		
	Kevin R. Lottes, Esc	ļ			
		Name			
	9132 Strada Place, S	uite 207			
	Florida street address (P.O. Box NOT acceptable)				
	Napels	FL	34108		
	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)

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## ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Aldo J. Quattrocchi 6866 Sterling Greens Drive #101 Naples, F1, 34104
(Use attachment if necessary)	
(If an effective date is listed, the date must be sp the date of filing.)	te of filing: 3/23/22 (OPTIONAL)  pecific and cannot be more than five business days prior to or 90 days afte  meet the applicable statutory filing requirements, this date will not be listed
the document's effective date on the Departmen	
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Peter athorsel spresentation
	nember 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.

Kevin R. Lottes. Esq., Authorized Representative
Typed or printed name of signee

## 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)

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