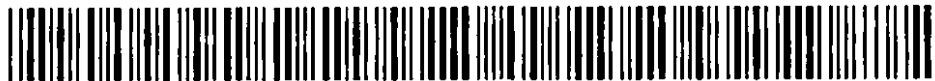


Florida Department of State
 Division of Corporations
 Electronic Filing Sheet
L22000218885

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

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

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
 Account Number : 110432003053
 Phone : (561)694-8107
 Fax Number : (561)214-8442

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 Central LLC

Certificate of Status	1
Certified Copy	0
Page Count	04 5
Estimated Charge	\$130.00

2022 MAY 16 PM 12:15

ALL PROVIDED
AND
FILED

Resubmission after rejection. please honor original file date: 5/16/22

Electronic Filing Menu

Corporate Filing Menu

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MAY 23 2022

K. Brumbley

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Naples Central LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kevin Kelly

Name of Person

Firm/Company

725 Hertel Avenue, Unit 930

Address

Buffalo, New York 14207

City/State and Zip Code

kevin.m.kelly@outlook.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John A. Moscatti, Jr.

716

885-1150

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Naples Central 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:

725 Hertel Avenue, Unit 930
Buffalo, New York 14207

Mailing Address:

725 Hertel Avenue, Unit 930
Buffalo, New York 14207

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

801 US Highway 1
Florida street address (P.O. Box **NOT** acceptable)

<u>North Palm Beach</u>	<u>Florida</u>	<u>33408</u>
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..



Erin Saville, Special Secretary
Registered Agent's Signature (REQUIRED)

(CONTINUED)

APPROVED
AND
FILED

2022 MAY 16 PM 12:15

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

Kevin Kelly

725 Hertel Avenue, Unit 930

Buffalo, New York 14207

AMBR

Elizabeth Kelly

725 Hertel Avenue, Unit 930

Buffalo, New York 14207

(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:

Margot V. Knab

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.

Margot V. Knab

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)