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.

(((H230003421003)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : RASI

Account Number : I20220000023

: (800)221-2972 Fax Number : (917)243-5843

\*\*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 Park Properties LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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Lexitas

From: Veronica Gonzal

1/001 Fax Server

September 29, 2023

FLORIDA DEPARTMENT OF STATE Division of Corporations

RASI

SUBJECT: NAPLES PARK PROPERTIES LLC

REF: W23000133449

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

FAX Aud. #: H23000342100

Letter Number: 823A00022572

Genesis R Kersey Regulatory Specialist II

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Naples Park Properties LLC

(Must end with 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: 3854 Richmond Ave 3854 Richmond Ave Staten Island NY 10312 Staten Island NY 10312

## 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:

Nicholas Long Esc	۹.	
•	Name	
750 Eleventh Street	South Ste 202	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	ceptable)
Naples	FI.	34102
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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SECRETARY OF STATE
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Page: 5 of 5

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	Lawrence Chiarappo
and the state of t	3854 Richmond Ave
	Staten Island NY 10312
MGR	Ronald Galizia
	Staten Island NY 10307
(Use attachment if necessary)	
APTICLE V. DOSovier despite the destination of the corre	
ARTICLE V: Effective date, if other than the date of filing	(OPTIONAL)
the date of filing.)	id cannot be more than five business days prior to or 90 days after
	applicable statutory filing requirements, this date will not be listed a
the document's effective date on the Department of State	's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	

#### 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 fry in s.847.755, F.S.

Lawrence Chiarappo

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)
- S 5.00 Certificate of Status (Optional)

SECRETARY OF STATE