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## COVER LETTER

	ew Filing Sec ivision of Co					
SUBJECT	Belmare, I	LC				
SOM NO	•	Name	of Limited	l Liabili	y Company	
The enclos	ed Articles of	Organization and fe	ee(s) are su	bmitted	for filing.	
Please retu	rn all corresp	ondence concerning	this matter	to the fe	ollowing:	
	Brittany R. I	Balzotti				
		•	N	ame of	Person	
			i	irm/Cor	npany	
	36 Alexandr	a Road				
				Addre	SS	
	Lynnfield, M	1A 01940				
	Brittanybalzo	tti@gmail.com	City/S	State and	Zip Code	
			oc used for	future ar	nual report notificati	on)
for further i	nformation co	ncerning this matter	, please cal	1:		
		781 _at (		718-2878		
	Nam	e of Person	Area (		Daytime Telephone	
Enclosed is	s a check for t	he following amoun	t:			
<b>■</b> \$125.00	Filing Fee	□\$130,00 Filing Certificate of Sta	tus	Certifie	.00 Filing Fee & d Copy l 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			) 1	Street Address New Filing Section Di The Centre of Tallaha 1415 N. Monroe Stree Tallahassee, Fl. 3230	ssee a, Suite 810	

## ARTICLES OF ORGANIZATION OF BELMARE, LLC

Pursuant to the provisions of Chapter 605 of the Florida Statutes, to form a Limited Liability Company, the undersigned hereby certifies as follows:

- 1. Name of the Limited Liability Company. The name of the limited liability company formed here by is BELMARE, LLC (the "Company").
- 2. Address of the Company. The mailing address and the street address of the principal office of the limited liability company is:

PRINCIPAL OFFICE	MAILING ADDRESS
1101 BRICKELL AVENUE, S-800	36 ALEXANDRA ROAD
MIAMI, FL 33131	LYNNFIELD, MA 01940

3. Registered Agent. The name and Florida street address of the duly appointed registered agent for service of process is BRITTANY R. BALZOTTI of 1101 BRICKELL AVENUE, S-800, MIAMI, FL 33131.

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..

Buttany R. Burrott

Registered Agent's Signature

**4.** <u>Managers</u>. The name and address of each person authorized to control and manage the limited liability company is as follows:

MGR

BRITTANY R. BALZOTTI

36 ALEXANDRA ROAD

LYNNFIELD, MA 01940

DAWN M. BALZOTTI

36 ALEXANDRA ROAD

LYNNFIELD, MA 01940

LYNNFIELD, MA 01940

LYNNFIELD, MA 01940

OBJET 18

**6.** Other Provisions. None.

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.

BV: BRITTANY RI BALZOTTI

Its: Authorized Person

By: DAWN M. BALZOTTI

Its: Authorized Person