M1/00000037/6

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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A. LUNT JUL 22 2011 WINER EXAMINER			
JUL 22 2011 101/-39			
EXAMINER			

Office Use Only



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FILED



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 14, 2011

AUGIE K. FABELA SR. 28100 BONITA GRANDE DR. #304 NAPLES, FL 34135

SUBJECT: TUSCANY DEVELOPERS, LLC

Ref. Number: W11000032306

We have received your document for TUSCANY DEVELOPERS, LLC and check(s) totaling \$225.00. However, your check(s) and document are being returned for the following:

We are returning your check for \$225.00 to be replaced by one in the correct amount of \$125.00.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

List the name of the manager or managing members name in section 9.,

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 711A00014525



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 1, 2011

AUGIE K. FABELA SR. 28100 BONITA GRANDE DR. #304 NAPLES, FL 34135

SUBJECT: TUSCANY DEVELOPERS, LLC

Ref. Number: W11000032306

We have received your document for TUSCANY DEVELOPERS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

List the name of the manager in section 9.

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) 245-6094.

Letter Number: 511A00015930

Agnes Lunt Regulatory Specialist II

www.sunbiz.org

COVER LETTER

	ration Section on of Corporations	
SUBJECT:	Tuscany Developers, LC Name of Limited Liability Company	
The enclosed "A Existence, and c	Application by Foreign Limited Liability Company for Authorization to Transact Business in Plorida, ertificheck are submitted to register the above referenced foreign limited liability company to transact business in	ïcate o Fl <u>orid</u> a
Please return all	l correspondence concerning this matter to the following:	
	Augre K. Fabela Sr. Fig.	ED
	Tuscany Developers, uc	
	28100 Boite Grande Dr #30	4
	Naples Fl 34135 City/State and Zip Code	
	Barbara & Kondelaus.com E-mail address: (to be used for future annual report notification)	
For further infor	rmation concerning this matter, please call:	
	BZW Dara Chase at 239 405.7780 Name of Person Area Code & Daytime Telephone Number	
Divisio Registra P.O. Bo	ING ADDRESS: on of Corporations ration Section ox 6327 Division of Corporations Registration Section OX 6327 Clifton Building assee, FL 32314 C661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a \$\frac{125.00}{\frac{125.00}{3}}\$	check for the following amount: 0 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$Certificate of Status \$\bigcup \\$155.00 Filing Fee & Certified Copy \$\bigcup \\$160.00 Filing Fee, Certified Copy	

A ...

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. TUSCANY Developers LLC (Name of Foreign Limited Liability Company; must include "Emitted Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Je aware 3. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)
4. 5.2.07 5. Ouration: Year limited liability company will cease to
والمراقب وال
6. (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty hability)
7. 28100 Bonita Grande Drive #304
Bonita Surings, F1 34135 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Augre K. Fabely St 28100 Bonita GRAde Drive #304
Bonita Springs, F1 34135
10. Attached is an arisinal partition of a jetano as more than 00 days and drive authoritioned by the official having a word of proceeding
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
Keal Estate Holdings
June K freed
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the
penalties of perjury that the facts stated herein are true. 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.)
Oracle K Fabela Se
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:		
Tuscany Developersulc		
If unavailable, the alternate to be used in the state of Florida is:		
MA		
2. The name and the Florida street address of the registered agent and office are: Ougle K. Jabela SR (Name)	SECRETARY TALLAHASSI	
18100 Bonta GRANDE DA SUITE 301 Florida Street Address (P.O. Box NOT ACCEPTABLE)	OF STATE	D
Maples, FL 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 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TUSCANY DEVELOPERS, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SECOND DAY OF JUNE, A.D. 2011.

4345102 8300

110503698

AUTHENTYCATION: 8804835

DATE: 06-02-11

You may verify this certificate online at corp.delaware.gov/authver.shtml