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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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TOSCANO PRO	PERTY HOLDIN	NGS LLC	
Please Debit FCA	000000003 For: 12	5	
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Thank you Seth N	leeley	-	
Att 1/2/	<i>*</i>		Art of Inc. File
			LTD Partnership File
		\ _	Foreign Corp. File
		_	L.C. File
		_	Fictitious Name File
		_	Trade/Service Mark
		_	Merger File
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			RA Resignation
		_	Dissolution / Withdrawal
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Requested by: SN		-	UCC 1 or 3 File
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name	Date	-	UCC II Retrieval
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COVER LETTER

	New Filing Section Division of Corporations			
SUBJEC	Toscano Property Holdings, LLC	C		
		f Limited Liabil	ity Company	
The enclo	sed Articles of Organization and fee(s) are submitted	for filing.	
Please ret	urn all correspondence concerning thi	s matter to the fe	ollowing:	
	Matthew P. Flores			
		Name of	Регѕол	
	Law Office of Matthew P. Flores			
		Firm/Con	пряпу	
	1333 Third Avenue South, Suite 50	5		
		Addres	is s	
	Naples, Florida 34102			
	matt@naplesbaylaw.com	City/State and	Zip Code	
-	E-mail address; (to be us	ed for future and	ual report notificat	tion)
For further in	formation concerning this matter, ple			,
	 _at(261-0592	
			Daytime Telephon	e Number
Enclosed is	a check for the following amount:			
≘\$ 125.00 I		Certified	0 Filing Fee & Copy opy is enclosed)	U\$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	New Tho 241	eet Address w Filing Section Diversition Diversition Diversition Diversition Diversition Diversities of Tallaha. 5 N. Monroe Street Inhance, FL 32303	ssee 5 Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabili	ty Company is:		
Toscano Property H (Must con	oldings, LLC tain the words "Limite	ed Liability Compa	any, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street a	nddress of the principa	d office of the Lim	nited Liability Company is:
Princis	nal Office Address:		Mailing Address:
Naples, Florida 341			4355 Mercantile Avenue Naples, Florida 34104
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an The name and the Florida street	y cannot serve as its o active Florida registra	wn Registered Age ation.)	Agent's Signature: ent. You must designate an individual or
	Julii F. Toscano	Name	
	4355 Mercantile	Avenuc	
	Florida street add	ress (P.O. Box NC	Y acceptable)
	Naples	Florida	34104
	City	State	Zip
place designated in this certificate	e, I hereby accept the o provisions of all statute bligations of my positi	ippointment as reg is relating to the pr ion as registered ag	or the above stated limited liability company at the istered agent and agree to act in this capacity. It is to a complete performance of my duties, are gent as provided for in Chapter 605, F.S.

(CONTINUED)

MGR* = Manager MGR John P. Toscano 4355 Mercantile Avenue Naples, Florida 34104 W: Effective date, if other than the date of filing:	Title:	Name and Addres	SS:
se attachment if necessary) V: Effective date, if other than the date of filing:	"AMBK" = A "MGD" = Ma	uthorized Member	-
se attachment if necessary) V: Effective date, if other than the date of filing:			
Se attachment if necessary) V: Effective date, if other than the date of filing:	MUK	John P. Toscano	
se attachment if necessary) V: Effective date, if other than the date of filing:		Naples, Florida 34104	!
Se attachment if necessary) W: Effective date, if other than the date of filing:			
Se attachment if necessary) W: Effective date, if other than the date of filing:			
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 1 am aware that any false information submitted in a document to the Department of State 1 am aware that any false information submitted in a document to the Department of State 2. John P. Toscano Typed or printed name of signee Filing Fees: 25.00 Filing Fee for Articles of Organization and Designation of Registered Agent 10.00 Certified Copy (Outloan)			
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ARTICLE IV-