

L04000022794



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11/22/04--01019--016 \*\*100.00

12/13/04--01003--013 \*\*25.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

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5p

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NC RESORTS, 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:

RODNEY E. GODWIN  
(Name of Person)

NC RESORTS, LLC  
(Firm/Company)

17539 BOAT CLUB DRIVE  
(Address)

FORT MYERS, FL 33908  
(City/State and Zip Code)

*W04-43996*

For further information concerning this matter, please call:

RODNEY E. GODWIN at ( 239 ) 777-6653  
(Name of Person) (Area Code & Daytime Telephone Number)

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**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

December 3, 2004

RODNEY E. GODWIN  
NC RESORTS, LLC  
17539 BOAT CLUB DRIVE  
FORT MYERS, FL 33908

SUBJECT: NC RESORTS, LLC  
Ref. Number: W04000043996

We have received your document for NC RESORTS, LLC and check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$25.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return 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) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 504A00067784

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TALLAHASSEE, FLORIDA

409 E. GAINES ST TALL 32399

Att Lee Rivers

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

NC RESORTS, 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:**

17539 BOAT CLUB DRIVE

17539 BOAT CLUB DRIVE

FORT MYERS, FL 33908

FORT MYERS, FL 33908

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

RODNEY E. GODWIN

Name

17539 BOAT CLUB DRIVE

Florida street address (P.O. Box **NOT** acceptable)

FORT MYERS FLORIDA 33908

City, State, and 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..*



Registered Agent's Signature

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**  
"MGR" = Manager  
"MGRM" = Managing Member

**Name and Address:**

MGRM

RODNEY E. GODWIN  
17539 BOAT CLUB DRIVE  
FORT MYERS, FL 33908

MGRM

Sally J Bohn  
17539 Boat Club Drive  
Fort Myers, FL 33908

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

RODNEY E. GODWIN

Typed or printed name of signee

**Filing Fees:**

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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