

# L04000065643

Division of Corporations

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DIVISION OF CORPORATION

## LIMITED LIABILITY COMPANY

5113 Cliveden, LLC

Certificate of Status	0
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**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 5113 Clivoden, 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:

Luis G. Reyes  
(Name of Person)

5113 Clivoden, LLC  
(Firm/Company)

8751 Belter Drive  
(Address)

Orlando, FL 32817  
(City/State and Zip Code)

For further information concerning this matter, please call:

Luis G. Reyes at ( 407 ) 970-7055  
(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

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

5113 Cliveden, LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

8751 Belfer Drive

Orlando, FL 32817

**Mailing Address:**

8751 Belfer Drive

Orlando, FL 32817

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

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

Luis G. Reyes

Name

8751 Belfer Drive

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

Orlando

FLORIDA 32817

City, State, and Zip

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*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.*

Luis G. Reyes

Registered Agent's Signature

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(CONTINUED)

