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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : HUBCO  
Account Number : 104662003400  
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Fax Number : (516)935-3088

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Charlesm@opamassie.com

**FLORIDA LIMITED LIABILITY CO.  
DRAKES PASSAGE PROPERTIES, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name

The name of the Limited Liability Company is:

**Drakes Passage Properties, LLC**

## ARTICLE II - Address

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

**16231 Shenandoah Circle  
Fort Myers, FL 33908**

## ARTICLE III -

### Registered Agent, Registered Office & Registered Agents Signature

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

**Kim Sanders**  
Name

**16231 Shenandoah Circle**  
(P.O. Box or Mail Drop Box NOT acceptable)

**Fort Myers, FL 33908**  
(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 605, F.S.*

  
Registered Agent's Signature - Kim Sanders

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**ARTICLE IV -**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**  
"AMBR" = Authorized Member  
"MGR" = Manager  
"MGMR" = Managing Member

**Name and Address:**

**AMBR**

**Kim Sanders  
16231 Shenandoah Circle  
Fort Myers, FL 33908**


**AMBR**

**Mark Sanders  
16231 Shenandoah Circle  
Fort Myers, FL 33908**


**ARTICLE V -**

**Effective date: April 2, 2019**

**REQUIRED SIGNATURE:**

  
*Signature of a member or authorized representative of a member*

(In accordance with section 605.0203(1)(B), Florida Statutes, 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.917.155, F. S.)

  
**Kim Sanders**

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TALLAHASSEE, FLORIDA

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