(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:
:

Office Use Only



200327791732

FILED

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

2.

ACCOUNT NO. : I2000000195
REFERENCE: 728469 8194256
AUTHORIZATION :
COST LIMIT: \$ 129.00
ORDER DATE : April 16, 2019
ORDER TIME : 2:49 PM
ORDER NO. : 728469-005
CUSTOMER NO: 8194256
DOMESTIC FILING NAME: 1030 CLEARWATER LARGO LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Roxanne Turner - EXT.
EXAMINER'S INITIALS:

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: 1030 Clear Water Lorgo	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 f	following:			
Jennifer S. Papineau Name of	Person			
1030 Clearwater La Firm/Co	rgo LLC			
1179 Northwest Bluc	<u>{</u>			
Addr	CSS			
Columbus, OH 43	212			
•	•			
JENNIFER & SHELBY MA E-mail address: (to be used for future a				
	inual report notification)			
For further information concerning this matter, please call:				
Name of Person Area Code	Daytime Telephone Number - Cell			
Enclosed is a check for the following amount:				
Certificate of Status Certific	0 Filing Fee & S160.00 Filing Fee, cd Copy al copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)			
	Street Address			
	New Filing Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassec, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1030 C	lear water L	argo LLC	<u>.</u>
(Must cont	ain the words "Limited	Liability Company.	"L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street a	ddress of the principal c	office of the Limited	Liability Company is:
<u>Princip</u>	al Office Address:		Mailing Address:
1179 North	vest Blud		same
Columbus,	OH 43212		
another business entity with an	cannot serve as its owr active Florida registration	n Registered Agent. \ on.)	it's Signature: You must designate an individual or
mother business entity with an	cannot serve as its owr active Florida registration	n Registered Agent. Non.) d agent are:	You must designate an individual or
mother business entity with an	cannot serve as its own active Florida registration address of the registere	n Registered Agent. Non.) d agent are:	You must designate an individual or
mother business entity with an	cannot serve as its own active Florida registration address of the registere	a Registered Agent. Non.) d agent are:	You must designate an individual or
mother business entity with an	cannot serve as its own active Florida registration address of the registere Corporation Service 1201 Hays Street	a Registered Agent. Non.) d agent are:	You must designate an individual or
mother business entity with an	cannot serve as its own active Florida registration address of the registere Corporation Service 1201 Hays Street	n Registered Agent. Non.) d agent are: te Company Name	You must designate an individual or
	cannot serve as its own active Florida registration address of the registered Corporation Service 1201 Hays Street Florida street address	n Registered Agent. Non.) d agent are: se Company Name	You must designate an individual or ceeptable)

(CONTINUED)

Registered Agent's Signature (REQUIRED)

9 APR 16 AM 10: 18

Asst. Vice President

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMRR	Jennifer S. Parpineou 1179 Northwest Blad Columbus, OH 43112
<u>AMBR</u>	Stephen J. Papineau 1179 Northwest Alva Calimbis, OH 43212
	
(Use attachment if necessary)	
reffective date is listed, the date must be ate of filing.)	ate of filing:
ICLE VI: Other provisions, if any,	

Dennifer & Papinoan

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 constitutes a third degree felony as provided for in s.817.155, F.S.

Jennifer S. Papineau

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)