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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : NJ LAW PLLC

Account Number : I20200000122

: (239)920-5228

Fax Number

: (239)920-5289

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

Email Address: JonathanWeirich@napleslaw.us

# FLORIDA LIMITED LIABILITY CO.

Gates Residential Holdings, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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(((H200003131013))),

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Gates Residential Holdings, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### ARTICLE II - Address:

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

#### Principal Office Address:

#### Malling Address:

27599 Riverview Center Blvd. #205 Bonita Springs, FL 34134 27599 Riverview Center Blvd. #205 Bonita Springs, FL 34134

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Yarnell & Peterson, PA c/o Jonathan M. Weirich, Esq.

Name

3431 Pine Ridge Rd. #101

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

Naples FL 34109
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 (REQUIRED)

(CONTINUED)

ARTICLE IV-

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"AMBR" = Authorized Member "MGR" = Manager  MGR	
MGR	
	Todd E. Gates
	27599 Riverview Center Blvd. #205
	Bonita Springs, FL 34134
ective date is listed, the date must be spe-	of filing: <u>09 08 2020</u> . (OPTIONAL) cific and cannot be more than five business days prior to or 9
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\$ 5.00 Certificate of Status (Optional)