## L22000003628

(Re	questor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	TIAW	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	)
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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2022 JAN -5 FM 1:0

SECRETARY OF STATE

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<b>CORPORATE</b>
ACCESS

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

			W	ALK IN			
		PICK U	U <b>P:</b>	01/05/2022			
	<b>X</b>	CERTIFIED COPY					
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		CUS					<del></del>
	ХX	FILING	LLC				
1.		LB BAYVIEW DEVELO		T, LLC	<del>-77 815.</del>		
2.		(CORPORATE NAME AND DOCUME	NT #)				
3.		(CORPORATE NAME AND DOCUME	NT #)				
4.		(CORPORATE NAME AND DOCUME	NT #)				
5.		(CORPORATE NAME AND DOCUME	NT #)				
6.		(CORPORATE NAME AND DOCUME	NT #)				
	ECIA. STRU	L CTIONS:					
		<del></del>					

## **COVER LETTER**

TO:	New Filing Section Division of Corporations			
CED IE	LB Bayview Development, LLC			
30000	LB Bayview Development, LLC CT: Name o	f Limited Liab	lity Company	
The enc	losed Articles of Organization and fee(	s) are submitte	d for filing.	
Please re	eturn all correspondence concerning th	is matter to the	following:	
	Lisa Van Dien			
		Name o	t Person	
	London Bay Development Group,	LLC		
		Firm/C	ompany	
	2210 Vanderbilt Beach Rd, Suite	1300		
		Ade	lress	
	Naples, Fl. 34109			
	алпатигрһу@londonbay.com	City/State a	nd Zip Code	
		used for future	annual report notificati	ion)
For furthe	r information concerning this matter. p	lease call:		
	Lisa Van Dien	239 t (	449-1511	
	Name of Person		Daytime Telephon	
Enclosed	I is a check for the following amount:			
□ <b>\$</b> 125.	00 Filing Fee	s Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
	Mailing Address New Filing Section		Street Address New Filing Section D	ivision
	Division of Corporations P.O. Box 6327		The Centre of Tallaha 2415 N. Monroe Stre	assec

Tallahassee, FL 32303

Tallahassee, FL 32314

FILED

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 2022 JAN -5 PM 2: 43

ARTICLE 1 - Name:	. 1.21		>ECRETARY (	ነር ራ
The name of the Limited Li	ability Company is:		SECRETARY ( FALLAHASS	EE,
	evelopment, LLC			
(Must	contain the words "Limited	Liability Company, '	'L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and str	eet address of the principal o	office of the Limited	Liability Company is:	
<u>Pri</u>	incipal Office Address:		Mailing Address:	
2210 Vanderbilt	t Beach Rd	2210	Vanderbilt Beach Rd	
Suite 1300			1300	
Naples, FL 3410	09	<u>Napi</u>	es, FL 34109	
•	pany cannot serve as its own h an active Florida registration treet address of the registered			
•	h an active Florida registration			
•	h an active Florida registration treet address of the registered	d agent are:		
•	h an active Florida registration treet address of the registered Stephen G. Wilson 2210 Vanderbilt Bea	d agent are:	ceptable)	
•	h an active Florida registration treet address of the registered Stephen G. Wilson 2210 Vanderbilt Bea	d agent are:  Name  ach Rd, Suite 1300	ceptable)	
•	h an active Florida registration treet address of the registered Stephen G. Wilson  2210 Vanderbilt Beau Florida street address	d agent are:  Name  ach Rd, Suite 1300 ss (P.O. Box NOT ac	•	
The name and the Florida st aving been named as registe ace designated in this certifi rther agree to comply with t	stephen G. Wilson  Stephen G. Wilson  2210 Vanderbilt Bea Florida street addres  Naples  City  cred agent and to accept serve icate, I hereby accept the apple the provisions of all statutes r	Name  ach Rd, Suite 1300  ss (P.O. Box NOT ac  FL  State  vice of process for the prointment as registere relating to the proper	34109	
The name and the Florida st aving been named as registe ace designated in this certifi rther agree to comply with t	stephen G. Wilson  2210 Vanderbilt Bea Florida street address  Naples  City  cred agent and to accept servicate, I hereby accept the apple the provisions of all statutes rhe obligations of my position	Name  ach Rd, Suite 1300  ss (P.O. Box NOT ac  FL  State  vice of process for the prointment as registere relating to the proper	34109 Zip above stated limited liability company at the diagent and agree to act in this capacity. I and complete performance of my duties, and sprovided for in Chapter 605, F.S	

(CONTINUED)

4	RT	$\mathbf{IC}$	LF	IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	LB Bayview Investments, LLC	
	2210 Vanderbilt Beach Rd, Suite 1300	
	Naples, FL 34109	
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an effective date is listed, the date must be speedate of filing.)  ote: If the date inserted in this block does not a  e document's effective date on the Department	meet the applicable statutory filing requirements, this date will not be listed a of State's records.	
RTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:		
This document is execu I am aware that any falso	ember or an authorized representative of a member, ated in accordance with section 605.0203 (1) (b), Florida Statutes, e information submitted in a document to the Department of State to felony as provided for in s.817.155, F.S.	
_Str.plen	Typed or printed name of signee	
Ą	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)