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(Re	equestor's Name)	
(Ac	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(8 u	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
	<u> </u>	





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2022 JUL - I AMII: 22 DEVISIONAL CARRESTE PRO

RECEIVED



CORPORATION SERVICE COMPANY 1201 Hays Street

_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 781894 AUTHORIZATION : COST LIMIT : ORDER DATE: June 30, 2022 ORDER TIME : 8:57 AM ORDER NO. : 781894-005 CUSTOMER NO: 4328337 DOMESTIC FILING NAME: 1176 SPYGLASS LANE, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY ____ PLAIN STAMPED COPY

EXAMINER'S INITIALS:

COVER LETTER

	New Filing S Division of C	Section Corporations					
SUBJEC'		yglass Lane, LLC					
002020		Name of	Limited Lia	bility Company		•	
The enclo	sed Articles	of Organization and fee(s	s) are submitt	ed for filing.			
Please ret	urn all corre	spondence concerning thi	s matter to th	e following:			
	Marlene !	Marsh, Paralegal					
	_		Name	of Person			
	Dentons (Cohen & Grigsby P.C.					
			Firm/	Сотралу			
	625 Liber	ty Avenue, 5th Floor					
			Ad	dress		·	
	Pittsburgh	n, PA 15222					
	fehlix.mehl	er@dentons.com	City/State	and Zip Code			
		E-mail address: (to be u	sed for futur	e annual report notification	on)	<u> </u>	
For further i	information	concerning this matter, pl	ease call:				
	Marlene M	larsh at	412	297-4993			
	N	ame of Person	Area Code	Daytime Telephone	Number		
Enclosed i	s a check fo	r the following amount:					
□\$125.00) Filing Fee	□\$130.00 Filing Fee Certificate of Status	Cert	155.00 Filing Fee & ified Copy onal copy is enclosed)	Certificate Certified C	Filing Fee, of Status & opy opy is enclosed)	
	New Divi P.O.	ling Address Filing Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address New Filing Section Div The Centre of Tallahas 2415 N. Monroe Street Tallahassee, FL 32303	ssee t, Suite 810	WEZ JUL - 1 AM 8: 27	FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1176 Spyglass Lane (Must con	atin the words "Limited I	iability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	address of the principal o	ffice of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
1176 Spyglass Lane			Box 20039 Clarence	
Naples, FL 34102			Brantford, Ontario N3R 0A4	
		Cana	<u> </u>	
•	active Florida registration address of the registered	n.) agent are:	You must designate an individu	at O
another business entity with an . The name and the Florida street	active Florida registratio	n.) agent are:		iai ui
•	active Florida registration address of the registered Dentons Cohen & Gr	n.) agent are: igsby P.C., Inc. Name		iai ui
•	active Florida registration address of the registered	n.) agent are: igsby P.C., Inc. Name		iai ui
•	active Florida registration address of the registered Dentons Cohen & Gr	n.) agent are: igsby P.C., Inc. Name		iai ui
•	active Florida registrational address of the registered Dentons Cohen & Gr 9110 Strada Place, Sur Florida street address	agent are: igsby P.C., Inc. Name ite 6200 (P.O. Box NOT ac	eceptable)	iai ui

(CONTINUED)



Title:	Name and Address:
"AMBR" = Authorized Mem "MGR" = Manager	lber -
AMBR	Patricia Louise Biesecke P.O. Box 20039 Clarence Brantford, Ontario N3R 0A4, Canada
AMBR	John McBroom Dimitrieff P.O. Box 20039 Clarence Brantford, Ontario N3R 0A4, Canada
(Use attachment if necessary)	
If an effective date is listed, the date he date of filing.) Note: If the date inserted in this block	man the date of filing: June 30, 2022 (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 days after t does not meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the D	repartment of State's records.

Signature of a member or an authorized representative of a member.

Marlene March

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.

Marlene Marsh, Authorized Representative

Filing Fees:

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

REOUIRED SIGNATURE:

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

