

L23000201145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

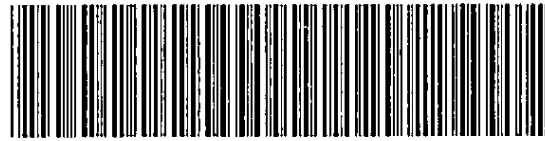
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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125.00

2023 APR 24 AM 10:46

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

2023 APR 24 AM 8:55

RECEIVED

·FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

Please use funds from this account: ~~426210000100~~ \$

Authorization Signature: \_\_\_\_\_

311 Stonecutter LLC

Business Name

Doc. #

Certified Copy of

Certificate of Status

**NEW FILINGS**

- Profit Corp
- Not for Profit
- Officer/Director
- Limited Liability
- Domestication
- Other
- CORP**
- LLP**

**AMENDMENTS**

- Amendment
- Resignation of R.A.
- Change of Registered Agent
- Revocation of Dissolution
- Merger
- Conversion**
- Amended and restated Articles**
- Statement of Authority**

**OTHER FILINGS**

- Annual Report
- Fictitious Name
- APOSTILLE

Country

**REGISTRATION/QUALIFICATIONS**

- Foreign filing
- Limited Partnership
- Reinstatement

\_\_\_\_\_ Other

EXAMINER'S INITIALS: \_\_\_\_\_

**ROBERT S. HAYES, P.A.**

**Attorney At Law**

441 W. Vine Street  
Kissimmee, FL 34741  
(407) 933-4005

April 19, 2023

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: 311 STONECUTTER LLC**

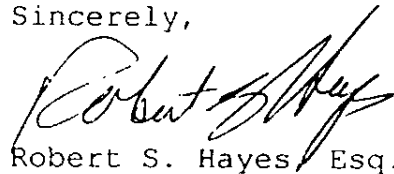
Dear Sir or Madam:

Please find enclosed an original and one copy of the Articles of Organization as well as the original Acceptance for the above-named Florida Limited Liability Company. The check for \$125.00 is also enclosed.

Please file the enclosed Articles of Organization and return a certified copy to the undersigned.

Thank you for your assistance in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert S. Hayes".

Robert S. Hayes, Esq.

RSH/yd

Enclosures

**ARTICLES OF ORGANIZATION**  
**OF**  
**311 STONECUTTER LLC**

2023 APR 21 PM 10:46  
SEAL

**ARTICLE I. COMPANY NAME**

The name of this Limited Liability Company is **311 STONECUTTER LLC**

**ARTICLE II. NATURE OF BUSINESS AND POWERS**

The general nature of the business to be transacted by this Limited Liability Company is to engage in any and all business permitted under the laws of the State of Florida.

**ARTICLE III.**

This Limited Liability Company shall exist perpetually.

**ARTICLE IV. REGISTERED AGENT AND INITIAL REGISTERED OFFICE**

The Registered Agent and the street address of the initial Registered Office of this Limited Liability Company in the State of Florida shall be:

ROBERT S. HAYES  
441 W. VINE STREET  
KISSIMMEE, FL 34741

The Limited Liability Company's principle address and mailing address is 1221 STONECUTTER DR., UNIT 311, CELEBRATION, FL 34747.

**ARTICLE V. MANAGEMENT**

Management of this Limited Liability Company shall be vested in the members.

**ARTICLE VI. MEMBERSHIP RESTRICTIONS**

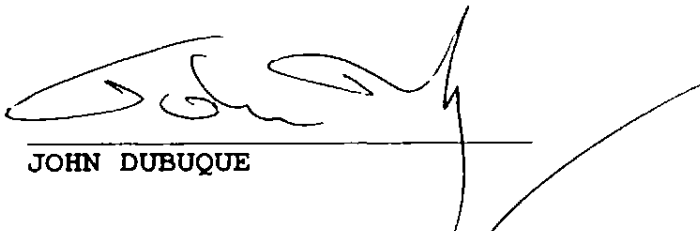
Members shall have the right to admit new members by unanimous consent. Contributions required of new members shall be determined as of the time of admission to the Limited Liability Company.

A member's interest in the Limited Liability Company may not be sold or otherwise transferred except with unanimous written consent of all members.

On the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of any other event that terminated the continued membership of a member in the limited liability company, the remaining members shall have the right to continue the business on unanimous consent of the remaining members.

The undersigned, being the original member of the Limited Liability Company, certifies that this instrument constitutes the proposed Articles of Organization of **311 STONECUTTER LLC**

Executed by the undersigned at 311 Stonecutter LLC, 1221 STONECUTTER DR., UNIT 311, CELEBRATION, FL 34747, on this 13 day of April 2023.



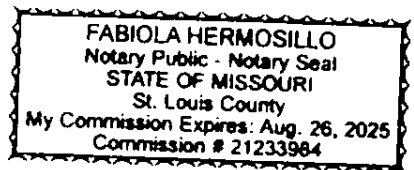
**JOHN DUBUQUE**

STATE OF ~~FLORIDA~~ Missouri  
COUNTY OF ~~OSCEOLA~~ St. Louis

2023 APR 24 AM 10:16  
Notary Seal

The foregoing instrument (Articles of Organization) was acknowledged before me by means of  physical presence or  online notarization, this 13 day of April 2023, by **JOHN DUBUQUE**, as agent on behalf of **311 STONECUTTER LLC**, a Florida limited liability company. **JOHN DUBUQUE** is  Personally Known OR has  Produced Identification Florida DL as Identification.

Fabiola H.  
NOTARY PUBLIC



2023 APR 21 AM 10:46  
SECURITY  
ST

ACCEPTANCE

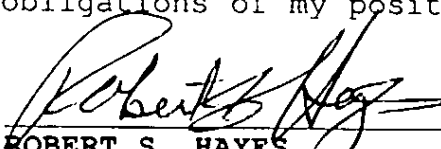
STATE OF FLORIDA  
COUNTY OF OSCEOLA

Pursuant to the provisions of sections 605.0113 and 605.0201 of the Florida Revised Limited Liability Company Act, the limited liability company identified below submits the following statement in designating its registered office and registered agent in the State of Florida:

The name of the limited liability company is **311 STONECUTTER LLC**

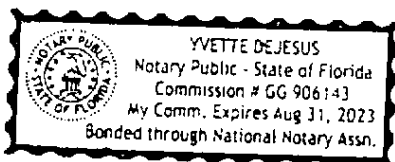
The name of the registered agent for **311 STONECUTTER LLC** is **SROBERT S. HAYES**, and the street address of the company's principal office where the agent is located is 441 W. Vine Street, Kissimmee, FL 34741.


This statement is to acknowledge that, as indicated above, **311 STONECUTTER LLC** has appointed **ROBERT S. HAYES** as its Registered Agent to accept service of process for the company at the place designated above in this certificate. I accept this 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.

  
ROBERT S. HAYES

STATE OF FLORIDA  
COUNTY OF OSCEOLA

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this 13<sup>th</sup> day of April 2023, by **ROBERT S. HAYES**, as agent on behalf of **311 STONECUTTER LLC**, a Florida limited liability company. **ROBERT S. HAYES** is  Personally Known OR has  Produced Identification as Identification.



  
NOTARY PUBLIC