## 100000068388

(Re	questor's Name	)
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
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SECRETANT OF STATE

## **COVER LETTER**

Division of Co					
SUBJECT: Arora's	Clubhouse				
<del>v .</del>	(Name of Limite	d Liability Company)			
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.			
Please return all corresp	ondence concerning this matte	er to the following:			
Jaymie L L					
	(	Name of Person)	_		
Arora's Clu			SEC TALL	07 J	-7-1
	(	Firm/Company)	至		emman:
330 Arora	Blvd.		(S)	28	-
		(Address)	-11 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1		
Orange Pa	ark, Florida 32073		LORI	Z: :U	The state of
<del></del>		/State and Zip Code)	0.\ri		
For further information	concerning this matter, please	call:			
Jaymie L Long		at (904 ) 228-532	7		
(Name	of Person)	(Area Code & Daytime To	elephone Number)		
Enclosed is a check for	or the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of State Certified Copy (additional copy is end	us &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns		

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company i	S.	
Arora's Clubhouse, LLC		
Must end with the words "Limited Liability Company, "Lin	nited Company" or their abbreviation "LLC	;" or "L.C.,")
A DETECT DAY A LA		
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited L	iability Company is:
The maining address and street address of the	principal office of the Elithica E	adonity Company is.
Principal Office Address:	Mailing Address:	
330 Arora Blvd.		
Orange Park, Florida 32073		
		<del></del>
ARTICLE III - Registered Agent, Register	ed Office. & Registered Agent'	's Signa <del>t</del> ûre≳
The Limited Liability Company cannot serve as its own Reg		
business entity with an active Florida registration.)		
The name and the Florida street address of the	e registered agent are:	CO Parent
Investo I. J. ann		
Jaymie L Long Nam	no	
Nan	ile.	AHIO: 5
330 Arora Blvd.		DA I
Florida street a	address (P.O. Box NOT acceptable)	
Orange Park,	<sub>FL</sub> 32073	
City, State	<del></del>	
Having been named as registered agent and t	to account complete of nyocasu for the	a ahova stated limitad
liability company at the place designated in		
registered agent and agree to act in this capac		
statutes relating to the proper and complete		
accept the obligations of my position as re		
/ Jaimin Har	m A	
The state of the s	DECLUBED)	
Hegistered Agent's Sign	nature (REQUIRED)	

(CONTINUED)
Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Man: "MGRM" = M:	ager anaging Member	Name and Address:			
MGRM	gg	Jaymie L Long			
· · · · ·	<del></del>	1305 Elk Court South			
		Orange Park, Florida 32073			
<del> </del>	<del></del>				
	e date, if other than the	date of filing: (			
If an effective date is loor 90 days after the	•	e specific and cannot be more than five bu	isiness (	days p	)rior
<u>REQUIRED</u> S	SIGNATURE:	•			
	( Jarmie)	Rong	<b>7</b>		
	Signature of a membe	r or an authorized representative of a member.	TL SEC	9 <b>7</b>	,
	of this document consti	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury	RE IAR AHASS	JUN 2	C31 2200
	that the facts stated h  Jaymie L Long	erein are true.)	SEE.	œ	D D
		ped or printed name of signee	ارن ان ا		2 j j
Filing For	p¢•		SRIT	ر ب	F. Same

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

\$ 5.00 Certificate of Status (Optional)