111000039022

(Re	questor's Name)	
		·
(Ad	dress)	
(A d	dress)	···
(Au	ulessj	
*2		
(Cit	y/State/Zip/Phone	#)
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•
	<u> </u>	—
☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ie)
	cument Number)	
(100	cument Number)	
Certified Copies	Certificates	of Status
	-	
Special Instructions to	Eiling Officer	
Special instructions to	Filing Onicei.	
		; `
		j
		Ì
1 1 1 1 1 1	1	
WII-99	45	
-011	10	

Office Use Only



100194166001

02/17/11--01052--012 **125.00

FILED

11 MAR -8 AM D 20

SEGRETARY OF STATE ANASSES FLORIDA

D. BRUCE
MAR 9 2011
EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 18, 2011

ALFRED C. CLARK 4440 PGA BLVD, STE 405 PALM BEACH GARDENS, FL 33410

SUBJECT: CLEARVIEW INVESTMENTS, LLC

Ref. Number: W11000009945

We have received your document for CLEARVIEW INVESTMENTS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through, the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. whe word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 111A00004253

COVER LETTER

TO:

Registration Section

Division of Cor	porations			
SURVINCE QA INV	vestments, LLC			
SUBJECT: CTT III		l Liability Compar	ıy	
The employed Auticles of	Organization and fee(s) are su	hmitted for filing		
	_			
Please return all correspo	ondence concerning this matte	r to the following:		
Alfred C.	Clark			
	ì	Name of Person		
Aberdeen	, Inc.			
		Firm/Company		
4440 PGA	Blvd, Ste 405			
		Address	·	
Palm React	n Gardens, FL 3341	ın		- maj
1 ann beach		State and Zip Code	.	
crogers@ab	erinc.com_			
	E-mail address: (to be used fo	r future annual repor	1 notification)	AR)
For further information c	oncerning this matter, please	call:		E T
Alfred C. Clark		at (561)	355-8251	55 5 C
Name o	f Person	Area Code	& Daytime Telephone	
Enclosed is a check fo	r the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	y Ce is enclosed) Ce	60.00 Filing Fee, extificate of Status & extified Copy Iditional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations	·

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	A	RT	'IC	LE	I -	N	a m	e	:
------------------	---	----	-----	----	-----	---	-----	---	---

The name of the Limited Liability Company is:

\wedge	Inve	ctm	ents.	1 1	\sim
$\omega \wedge$	שעווו	ະວແມ	CIIIO.	, L.L	. U

(Must end with 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:

Mailing Address:

c/o Susan Gibbons, HTM Trust (Bermuda) Ltd

Victoria Place, 31 Victoria St

Hamilton, HM 10 Bermuda

c/o Aberdeen, Inc. 4440 PGA Blvd, Ste 405

Palm Beach Gardens, FL 33410

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:

Aberdeen, Inc.

Name

4440 PGA Blvd, Ste 405

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

Palm Beach Gardens ...

. 33410

City, State, and Zip

FILED

11 MAR -8 MM D. 20
SEURETARY OF STATE
TALLAHASSEE, FLORIDA

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 608, F.S..

Registered Agent's Signature (RECUIRED)

(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:

"MGR" = Manager "MGRM" = Managing Membe	Name and Address:
Sole Mem/Mgr-(MGRM)	The Arias Trust
	HTM Trust (Bermuda) Ltd as Trustee
	c/o Susan Gibbons, Victoria Place
	31 Victoria St
	Hamilton HM 10, Bermuda
•	
	
	
(lise attachment if necessary)	
n effective date is listed, the date n	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days pri
FICLE V: Effective date, if other the neffective date is listed, the date in	
FICLE V: Effective date, if other the neffective date is listed, the date is 90 days after the date of filing.)	
FICLE V: Effective date, if other the neffective date is listed, the date in 90 days after the date of filing.) REQUIRED SIGNATURE:	
ricle V: Effective date, if other the neffective date is listed, the date in 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with sections that any false is a may are that any false.)	nust be specific and cannot be more than five business days pri
r 1CLE V: Effective date, if other the n effective date is listed, the date in r 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with seconstitutes an affirmation I am aware that any false constitutes a third degree	member or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true.
r 1CLE V: Effective date, if other the n effective date is listed, the date in r 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with seconstitutes an affirmation I am aware that any false constitutes a third degree	member or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution of this document of under the penalties of perjury that the facts stated herein an end of the penalties of perjury that the facts stated herein are the penalties of pe

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)