

L00000012753

CCRS
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: CINDY HICKS

DATE: 10-19-00

REF. #: 017413437

CORP. NAME: AVILA FAMILY, L.L.C.

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
OCT 19 10 10 AM '00
TALLAHASSEE, FL 32301

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | <input type="checkbox"/> UCC-1 | <input type="checkbox"/> UCC-3 |
| <input type="checkbox"/> OTHER: _____ | | |

400003429584--6
-10/19/00--01030--024
***155.00 ***155.00

STATE FEES PREPAID WITH CHECK# 9128 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$

PLEASE RETURN:

- ☒ CERTIFIED COPY ☐ CERTIFICATE OF GOOD STANDING ☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

Examiner's Initials

FILED
00 OCT 19 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FL 32301

10-19-00

ARTICLES OF ORGANIZATION

AVILA FAMILY, L.L.C.,
a Florida limited liability company

ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

AVILA FAMILY, L.L.C.

ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

511 Putter Lane
Longboat Key, FL 34228

ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The Limited Liability Company's registered office and its initial registered agent shall be:

J. Albert Avila

511 Putter Lane
Longboat Key, FL 34228

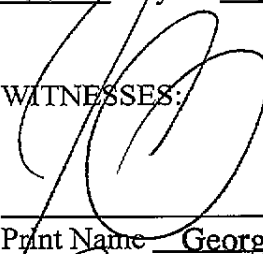
ARTICLE VI MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement and Regulations of the Limited Liability Company.

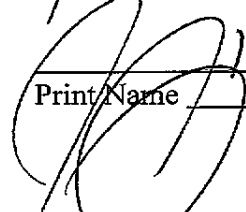
APPROVED
AND
FILED
00 OCT 19 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the
18th day of October, 2000.

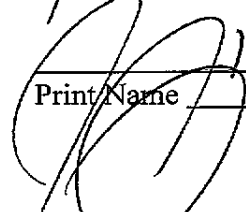
WITNESSES:


Print Name George H. Mazzarantani


J. Albert Avila


Print Name KENNETH D. DOERR


Heather C. Avila


Print Name George H. Mazzarantani


Print Name KENNETH D. DOERR

"MANAGERS"

APPROVED
AND
FILED

00 OCT 19 PM 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

Avila Family, L.L.C.

2. The name and the Florida street address of the registered agent are:

J. Albert Avila
511 Putter Lane
Longboat Key, FL 34228

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: _____

10/18/00


J. Albert Avila

"REGISTERED AGENT"

00 OCT 19 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED