

100000012917

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

(City, State, Zip)

385-6735

(Phone #)

OFFICE USE ONLY

300003434919-2
-10/23/00-01019-025
****155.00 ****155.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Mayina Isle, LLC (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

RECEIVED
00 OCT 23 AM 10:59
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF ORGANIZATION
OF
MARINA ISLE, LLC

I, the undersigned sole member and organizer of this limited liability company, under the Florida Limited Liability Company Act, adopt the following Articles of Organization for such limited liability company:

ARTICLE I
NAME

The name of the limited liability company shall be **MARINA ISLE, LLC**.

ARTICLE II
PRINCIPAL OFFICE AND MAILING ADDRESS

The address of the principal office of this limited liability company is **3812 W. Highway 46, Geneva, FL 32732**, and the mailing address shall be the same. This limited liability company shall have the power and authority to establish branch offices at any other place or places as the members may designate.

ARTICLE III
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the limited liability company is **200 W. First St., Suite 22, Sanford, FL 32771**, and the name of the company's initial registered agent at that address is **FRANK C. WHIGHAM**.

ARTICLE IV
MEMBER AND MANAGEMENT

The company shall be managed by a manager appointed by the member of the company. The power to adopt, alter, amend or repeal the regulations of this limited liability company shall be vested in the members of the company.

The name and address of the sole member of the company is:

ELEANOR C. RUSSELL INTERVIVOS TRUST dated October 17, 1989
P. O. Box 4296
Sanford, FL 32772-04296

No additional members shall be admitted unless all members, (including any additional members other than original members) shall unanimously agree, and on such terms and conditions as shall be agreed unanimously.

The death, retirement, resignation, expulsion, bankruptcy or dissolution of any member, or the occurrence of any event which terminates the continued membership of a member of this limited liability company, shall terminate this company, unless the remaining members shall unanimously agree to continue the business of the company, in which event, this company shall not so terminate.

**ARTICLE V
DURATION**

The period of duration for this limited liability company shall be perpetual from the date of issuance of a Certificate of Organization by the State of Florida.

IN WITNESS WHEREOF, the undersigned member and organizer has executed these Articles of Organization of **MARINA ISLE, LLC** on this 19th day of October, 2000.

ELEANOR C. RUSSELL INTERVIVOS TRUST
dated October 17, 1989
By: Lynda Russell Schroeder
Lynda Russell Schroeder, Trustee

STATE OF FLORIDA)
COUNTY OF SEMINOLE)

The foregoing instrument was acknowledged before me by **LYNDA RUSSELL SCHROEDER**, as Trustee of the **ELEANOR C. RUSSELL INTERVIVOS TRUST** dated October 17, 1989, personally known to me, or who provided _____ as identification, this 19th day of October, 2000.

(Affix notarial seal)



Patricia W. Austin
Notary Public-State of Florida

Print Name: PATRICIA W. AUSTIN

STATEMENT DESIGNATING REGISTERED AGENT AND OFFICE

STATE OF FLORIDA)
COUNTY OF FLORIDA)

Pursuant to the provisions of Section 608.415 of the Florida 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.

1. The name of the limited liability company is **MARINA ISLE, LLC**.

2. The name of the registered agent for **MARINA ISLE, LLC**, is **FRANK C. WHIGHAM**, and the street address of the company's principal office where the agent is located is 200 W. First St., Suite 22, Sanford, FL 32771.

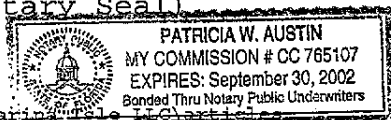
3. This statement is to acknowledge that, as indicated above, **MARINA ISLE, LLC**, has appointed me, **FRANK C. WHIGHAM**, as its registered agent to accept service of process for the company at the place designated above in this certificate. I accept this appointment as registered agent and agree to 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.

Dated this 19th day of October, 2000.

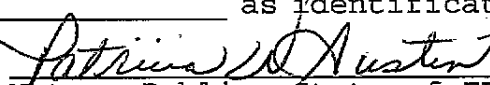

FRANK C. WHIGHAM

The foregoing instrument was acknowledged before me this 19th day of September, 2000, by **FRANK C. WHIGHAM**, agent on behalf of **MARINA ISLE, LLC**, a limited liability company. He is personally known to me or provided _____ as identification.

(Affix Notary Seal)



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Notary Public, State of FL
Print Name: PATRICIA W. AUSTIN

APPROVED
AND
FILED