



LD10000001573

ACCOUNT NO. : 072100000032

REFERENCE : 149119 4375876

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 125.00

ORDER DATE : May 14, 2001

ORDER TIME : 1:16 PM

ORDER NO. : 149119-005

CUSTOMER NO: 4375876

700004215197--0

CUSTOMER: Ms. Tammy Pagan
Lewis Rice & Fingersh, L.c.
Attorneys At Law
500 North Broadway
Suite 2000
St. Louis, MO 63102

DOMESTIC FILING

NAME: OVBAY, LLC

EFFECTIVE DATE:

☐ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP
☒ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Sandra Mathis - EXT. 1165

EXAMINER'S INITIALS:

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 MAY 14 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

JB
5/14/01

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Ovbay, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

27170 Hickory Boulevard, Bonita Springs, Florida 33923

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Denae L. Bayer
Name
27170 Hickory Boulevard
Florida street address (P.O. Box <u>NOT</u> acceptable)
Bonita Springs FL 33923
City, State, and Zip

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.

Denae L. Bayer

By: Denae L. Bayer
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Gregory R. Beekman
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Gregory R. Beekman, Authorized Representative

Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

01 MAY 14 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
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