# Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

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From:

Account Name : FIELDSTONE LESTER SHEAR & DENBERG

Account Number : I19990000180

Phone

: (305)357-5775 Fax Number : (305)357-5534

## LIMITED LIABILITY COMPANY

Kings Andover Phase II, LLC

Certificate of Status	
Certified Copy	
Page Count	1
Estimated Charge	\$155.00
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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

KINGS ANDOVER PHASE II, LLC

#### ARTICLE II - Address:

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

201 Alhambra Circle, Suite 601 Coral Gables, FL 33134

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

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

Ronald R. Fieldstone
Name

201 Alhambra Circle, Suite 601
Florida street address (P.O. Box NOT acceptable)

Coral Gables, Florida 33134
City, State, and Zip

SECRETARY 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 psylposition/as registered agent as provided for in Chapter 608, F.S.

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)

Ronald R. Fieldstone, Member Signature of a member or an apphorized representative of a member.
Signature of a member or an authorized representative of a member.
The same of the sa
(In accordance with section 608,408(3), Florida Statutes, the execution of this document constitutes an affirmation inder the penalties of perjury that the
facts stated herein are true.)
11/1/16
Typed or printed name of signee
<del>-</del>

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