

L0300001 5563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

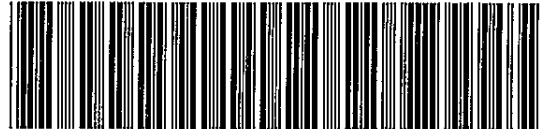
(Business Entity Name)

(Document Number)

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03 APR 30 PM 4:05

STATE  
TALLAHASSEE, FLORIDA

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DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

03 APR 30 PM 2:34

RECEIVED



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 075259 102759A

AUTHORIZATION : *Patricia Pignato*

COST LIMIT : \$ 160.00

ORDER DATE : April 30, 2003

ORDER TIME : 1:27 PM

ORDER NO. : 075259-005

CUSTOMER NO: 102759A

CUSTOMER: Ms. Mary Maish  
Retail Development,  
Incorporated  
Suite 102  
2640 Golden Gate Parkway  
Naples, FL 34105

03 APR 30 PM 4:05  
FILED  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: WINKLER INVESTMENTS, L.L.C.

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS: \_\_\_\_\_

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:  
WINKLER INVESTMENTS, LLC.

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
2640 GOLDEN GATE PARKWAY, SUITE 102, NAPLES, FL 34105

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

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

CORPORATION SERVICE COMPANY

Name

1201 HAYS STREET

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

TALLAHASSEE

FL 32301

City, State, and Zip

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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.*

Corporation Service Company

Registered Agent's Signature

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

Thomas D. Murray  
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.)

Thomas D. Murray

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)