

L03000025612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

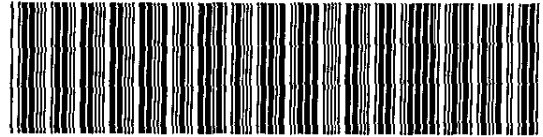
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TALLAHASSEE, FLORIDA

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03 JUL 14 AM 11:00
TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE
ACCOUNT FILING COVER SHEET

Account Number FCA000000017

Reference:
(Sub Account)

Date:

July 14, 2003

Requestor Name:

Carlton Fields

Address:

Post Office Drawer 190
Tallahassee, Florida 32302

Telephone:

(850) 224-1585

Contact Name:

~~Kim Pullen, CLA (x261)~~ JOAN (x243)

Corporation Name:

Pinecrest Investors, LLC

Entity Number:

Authorization:

J. Perrenat

☒ Articles of Organization & Designation
Certified Copy

☒ ART. of organization
New Filings

☐ Fictitious Name

☐ Plain Stamped Copy

☐ Amendments

☒ Certificate of Status

☐ Annual Report

☐ Registration

(X) Call When Ready

(X) Call if Problem

() After 4:30

(X) Walk In

() Will Wait

(X) Pick Up

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Client: 33670

Matter: 69907

Name: U/om

Office: Tampa

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STATE
TALLAHASSEE, FLORIDA

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(X) Pick Up

CF Internal Use Only

Client: 33670

Matter: 69907

Name: William

Office: Tampa

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pinecrest Investors, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

Cathy Crittenden

(Name of Person)

Sirote & Permutt, P.C.

(Firm/Company)

2311 Highland Avenue S

(Address)

Birmingham, AL 35205

(City/State and Zip Code)

For further information concerning this matter, please call:

Cathy Crittenden

(Name of Person)

at (205) 930-5308
(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pinecrest Investors, LLC

ARTICLE II - Address:

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

Principal Office Address:

One Harbour Place

777 South Harbour Island Boulevard

Tampa, FL 33602-5730

Mailing Address:

P.O. Box 3239

Tampa, FL 33601-3239

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

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

CFRA, LLC

Name

One Harbour Place, 777 South Harbour Island Boulevard Suite 500

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

Tampa

FL 33602-5730

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..



Registered Agent's Signature

Paul Ullom on behalf of CFRA, LLC

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Joshua Kennedy Lowder

64 Ashley Avenue

Charleston, SC 29401

MGRM

Emily Elizabeth Lowder

631 North Walnut Street, Apt. A

Bloomington, IN 47404

MGRM

Anna Catherine Lowder

3236 Bankhead Avenue

Montgomery, AL 36106

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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.)

Anna Catherine Lowder, Member
Typed or printed name of signee

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)

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