<u>L0300050344</u>

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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ONVISION OF CORPORATIONS

OR DEC -1 AHII: 10



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Lighthouse Homes, 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:	
Cameron T. Hannum	Ç.
(Name of Person)	Nisiator 03 DEC
American Contractors Exam Services	一点器
(Firm/Company)	一 C元(
1945 W. Dunlap Ave., Ste. 6	OR P
(Address)	AN 11: 10
Phoenix, AZ, 85021	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Cameron T. Hannum at (480) 991-7000	<u>.</u>
(Name of Person) (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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE II - Address:	
he mailing address and street address of the	principal office of the Limited Liability Company i
rincipal Office Address:	Mailing Address:
13 Grand Rapids Blvd.	P.O. Box 11989
aples, FL, 34120	Naples, FL, 34108
	C - 0F
	- ₹
	H = 1
	red Office. & Registered Agent's Signature
RTICLE III - Registered Agent, Register the name and the Florida street address of the	red Office, & Registered Agent's Signature:
	red Office, & Registered Agent's Signature:
he name and the Florida street address of th	red Office, & Registered Agent's Signature:
he name and the Florida street address of the	red Office, & Registered Agent's Signature: the registered agent are: thoades me
he name and the Florida street address of the Scott J. F. National Scott	red Office, & Registered Agent's Signature: the registered agent are: thoades me
he name and the Florida street address of the Scott J. F. National Scott	red Office, & Registered Agent's Signature: the registered agent are: thoades me Rapids Blvd. P.O. Box NOT acceptable)

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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, Florida Statutes.

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

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

_	
Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Scott J. Rhoades
-	613 Grand Rapids Blvd.
	Naples, FL, 34120
MGRM	Kristen C. Rhoades
	613 Grand Rapids Blvd.
	Naples, FL, 34120
	=======================================
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	C ST
	APP OR ATT
(Use attachment if necessary)	6
	_
NOTE: An additional article must be	added if an effective date is requested.
DECLUBED CICAL PRIDE.	
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.)

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)