## Florida Department of State

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To:

Division of Corporations

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: (850)205-0383

From:

Account Name

: SIEGELAUB, LIEBERMAN & ASSOCIATES, P.A

Account Number : I19990000058

Phone Fax Number (954)753-2222 : (954)753-1123

# LIMITED LIABILITY COMPANY

PORT CHARLOTTE VACANT LAND LLC

Certificate of Status	1
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### Article I

The name of the Limited Company is:

Port Charlotte Vacant Land LLC

### Article II

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

2801 N. University Drive Suite 301 Coral Springs, FL 33065

## Article III

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

Scott Daiagi 2801 N. University Drive Suite Coral Springs, Fl 33065 TALLAHASSEE, FLORID

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Siegelaub, Licberman & Associates, P.A. 2801 N. University Drive Suite 301 Coral Springs, Florida 33065 Ph: (954) 753-2222 Fax (954) 753-1123

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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

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 managermanaged company.

signature of a member or an authorized representative of a member

Typed or printed name of signee

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