512

2007 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000058371

1. Entity Name

BAINBRIDGE CLERMONT INVESTMENTS LLC



FILED
May 01, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

12791 WEST FOREST HILL BOULEVARD, SUITE 5B WELLINGTON, FL 33414

12791 WEST FOREST HILL BOULEVARD, SUITE 5B WELLINGTON, FL 33414



04202007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 42-1640007 Applied For Not Applicable

5. Certificate of Status Desired

X

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHECHTER, RICHARD A 12791 WEST FOREST HILL BOULEVARD, SUITE 5B WELLINGTON, FL 33414

DO NOT WRITE IN THIS SPACE

			·
	named entity submits this statement for the purpose of chains of registered agent.	anging its registered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE_			
Signature, typed or printed name of registered agent and title if applicable (NOTE: Reg		(NOTE: Registered Agent signature required when reinstating)	DATE
	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		•
TITLE	MM	1.0	
NAME	SCHECHTER, RICHARD A	The state of the s	$= \frac{1}{2a_0} \frac{1}{a_0} \frac$
STREET ADDRESS	12791 W FOREST HILL BLVD #5B		

CITY-ST-ZIP WELLINGTON, FL 33414 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

% U00000752267 05/21/07-80010-001 55.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trusted employeered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

Thomas J Keady

4/24/07

561-333-3669

Davilme Phone #