

Florida Department of State  
Division of Corporations  
Public Access System

## Electronic Filing Cover Sheet

**Note:** Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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## To:

Division of Corporations  
Fax Number : (850) 205-0393

## From:

Account Name : BARNETT, BOLT, KIRKWOOD & LONG  
Account Number : 072731001155  
Phone : (813) 253-2020  
Fax Number : (813) 251-6711

Wor/21/04

## LIMITED LIABILITY COMPANY

Dartmouth Sun I, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Dartmouth Sun I, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

724-A 2nd Avenue South

St. Petersburg, Florida 33701

**Mailing Address:**

724-A 2nd Avenue South

St. Petersburg, Florida 33701

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

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

Frank S. Magglo

Name

724-A 2nd Avenue South

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

St. Petersburg,

FLORIDA 33701

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, Florida Statutes.*

  
Registered Agent's Signature

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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**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

**Dartmouth Development I, Inc.**  
724-A 2nd Avenue South  
St. Petersburg, Florida 33701

(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.)

Frank S. Maggio, Authorized Representative  
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)  
**\$ 3.00** Certificate of Status (Optional)

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