

W50000/3466

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

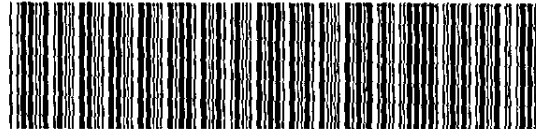
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**DENNIS V. NYMARK, P.A.**

Attorney at Law  
110 S. Pebble Beach Boulevard  
Sun City Center, FL 33573

Dennis V. Nymark

Phone: (813) 634-8447  
Fax: (813) 634-8918  
Email: NymarkLaw@aol.com

February 2, 2005

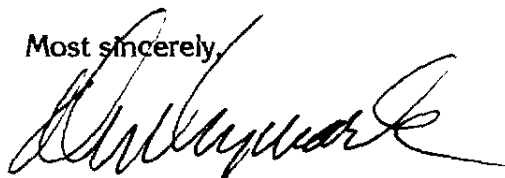
Division of Corporations  
Florida Department of State  
P.O. Box 6327  
Tallahassee, FL 32314

Re: CHARLOTTE S. NYMARK, LLC

Dear Sir or Madam:

Enclosed is the original and one copy of the Articles of Incorporation for CHARLOTTE S. NYMARK, LLC, and a check for \$125.00 Please return one certified copy.

Most sincerely,

A handwritten signature in black ink, appearing to read 'Dennis V. Nymark', written over a horizontal line.

Dennis V. Nymark

DVN:cn  
Enclosures

ARTICLES OF ORGANIZATION  
OF  
CHARLOTTE S. NYMARK, LLC

ARTICLE I  
NAME

The name of the limited liability company shall be:

CHARLOTTE S. NYMARK, LLC

ARTICLE II  
ADDRESS

The mailing address and street address of the principal office of the company are:

Principal Office Address

4529 Mink Way  
Sarasota, Florida 34235

Mailing Address

4529 Mink Way  
Sarasota, Florida 34235

ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT'S SIGNATURE:

The name and street address of the registered agent of the company in the state of Florida is DENNIS V. NYMARK, 110 So. Pebble Beach Blvd., Sun City Center, Florida 33573. 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

ARTICLE IV  
MANAGER OR MANAGING MEMBER

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Charlotte S. Nymark  
4529 Mink Way  
Sarasota, FL 34235

REQUIRED SIGNATURE:

Charlotte S. Nymark  
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.)

Charlotte S. Nymark  
Typed or printed name of signee