P.01/02

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

Erom:

Account Name : GRAY, HARRIS & ROBINSON, P.A. - ORLANDO

Account Number : 120010000078 Phone : (407)843-8880 Fax Number : (407)244-5690

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SION OF CORPORATION

LIMITED LIABILITY COMPANY

Destination Sebastian, LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$155.00

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Electronic Filing Menu

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Public Access Help

A MANO

articles of organization for Florida Limited Liability Company

ARTICLE I - Name:

The name of the Limited Liability Company is: Destination Sebastian, LLC.

ARTICLE II - Address:

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

2501 North Orange Avenue, Suite 340 Orlando, Florida 32804

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

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

David L. Schick, Bequire Name 101 East Pine Street, Suite | 400 Florida street address (P.O. Box NOT acceptable) Orlando, Florida 32801 City, State, and Zip

Having been named as registered agent and to accept service of process for the above mated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this copanity. I further agree to comply with the provisions of all statutes rolating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as ragistered agent as provided for in Chapter 608, F.S.

tegistered Agent's Signature: David L. Schick, Esquire

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 manager managed company.

Debbie Batchelor, Member

Debbie Batchelor, Member

Signature of a member of 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.)

> Debbie Batchelor Typed or printed name of signee

PILING FEES: \$100.00 Filing Pee for Anicles of Organization \$ 25.00 Designation of Registered Agent \$ 30,00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL)