

LOS000042251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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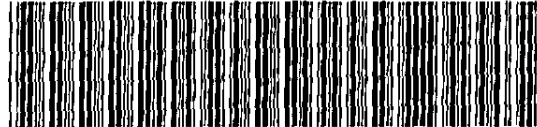
(Business Entity Name)

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STATE
FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARMSTRONG LAKE WALES II DEVELOPMENT, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID REAMS JAMIESON

(Name of Person)

ARMSTRONG LAKE WALES II DEVELOPMENT, LLC

(Firm/Company)

ONE ARMSTRONG PLACE

(Address)

BUTLER, PA 16001

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID REAMS JAMIESON

(Name of Person)

at (724)

283-0925

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RECEIVED
DIVISION OF CORPORATIONS
STATE OF FLORIDA

05 APR 25 AM 10:10

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARMSTRONG LAKE WALES II DEVELOPMENT, LLC

ARTICLE II - Address:

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

Principal Office Address:

13801 NORTH DALE MABRY HIGHWAY

SUITE 200

TAMPA, FL 33618

Mailing Address:

13801 NORTH DALE MABRY HIGHWAY

SUITE 200

TAMPA, FL 33618

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

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

Allen Goins/AG Armstrong Development, LLC

Name

13801 North Dale Mabry Highway, Suite 200

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

Tampa, Florida 33618

FL

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, F.S..



Registered Agent's Signature

(CONTINUED)

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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:

Allen Goins, MGR

13801 North Dale Mabry Highway, Suite 200
Tampa, FL 33618

Kirby Campbell, MGR

One Armstrong Place
Butler, PA 16001

Dru Sedwick, MGR

One Armstrong Place
Butler, PA 16001

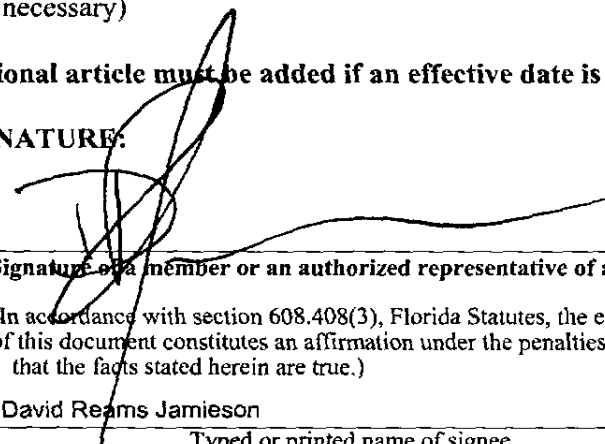
David
Reams Jaimeson, MGR

One Armstrong Place
Butler, PA 16001

(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.)

David Reams Jaimeson

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**
- \$ 30.00 Certified Copy (Optional)**
- \$ 5.00 Certificate of Status (Optional)**

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