

L05000058561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500056100485

06/14/05--01002--019 \*\*125.00

FILED  
2005 JUN 14 AM 10:32  
RECEIVED  
05 JUN 14 PM 9:36  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. SMITH JUN 14 2005

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Glacier Vistas, LLC

FILED  
2005 JUN 14 AM 10:32  
TALLAHASSEE, FLORIDA

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☒ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

WC 6/14 9:00

**ARTICLES OF ORGANIZATION  
OF  
GLACIER VISTAS, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby makes, acknowledges, and files the following Articles of Organization.

**ARTICLE I - NAME**

The name of the Limited Liability Company is: Glacier Vistas, LLC ("Company").

**ARTICLE II - ADDRESS**

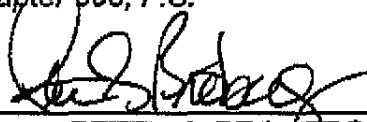
The mailing address and street address of the principal office of the Limited Liability Company is: 223 Peruvian Avenue, Palm Beach, FL 33480

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

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

PETER S. BROBERG  
223 Peruvian Avenue  
Palm Beach, FL 33480

*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.*

  
PETER S. BROBERG

**ARTICLE IV - MANAGEMENT**

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(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.)

By:   
PETER S. BROBERG, Authorized Representative