

L06000000252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

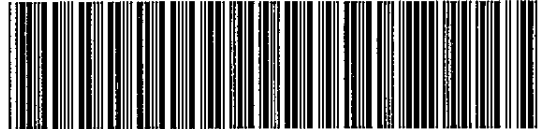
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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06 JAN -3 AM 11:33

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/St/Zip

850-222-2785

Phone #

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- CODI HOLDINGS, LLC

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
CODI HOLDINGS, LLC**

THE UNDERSIGNED hereby certify that we have associated ourselves together for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. We further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

**ARTICLE I
NAME**

The name of the limited liability company (the "Company") shall be
Codi Holdings, LLC

**ARTICLE II
ADDRESS**

The mailing and street address of the Company's principal office is:
3450 Cartwright Court, Bonita Springs, Florida 34134.

**ARTICLE III
PURPOSES**

The general nature of the business or businesses to be transacted and which the Company is authorized to transact shall be as follows:

- A. To engage in any activity or business authorized under the Florida Statutes.
- B. In general, to carry on any and all incidental business; to have and exercise all the power conferred by the laws of the State of Florida, and to do any and all things herein set forth to the same extent as a natural person might or could do.

**ARTICLE IV
DURATION**

The duration for the Company is perpetual.

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TALLAHASSEE, FLORIDA

**ARTICLE V
REGISTERED AGENT AND OFFICE**

The name of the Company's initial registered agent in Florida is Stanley Lieberfarb and the address of the Company's registered agent in Florida is: 1100 Fifth Avenue South, Suite 405, Naples Florida 34102.

**ARTICLE VI
MANAGEMENT**

The Company is to be managed by a manager or managers and the name(s) and addresses of such initial manager is: Alan Codi, 3450 Cartwright Court, Bonita Springs, Florida 34134.

**ARTICLE VII
ADMISSION OF NEW MEMBERS**

Members of the Company have the right to admit new members. Additional members may be admitted only on the unanimous written consent of the existing members, and the existing members shall determine the amount and nature of the contribution by new members at the time the new members are admitted.

**ARTICLE VIII
CONTINUATION OF BUSINESS OPERATIONS**

The Company may continue its business operations upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability Company only upon the unanimous approval of the remaining members.

**ARTICLE IX
TRANSFERABILITY OF MEMBER'S INTEREST**

A member's interest in the Company shall not be transferred unless the transfer is approved by the members in accordance with the Company's regulations.

IN WITNESS WHEREOF, the undersigned have executed these Articles of Organization this 30th day of December, 2005.


Alan Codi

STATE OF FLORIDA)
COUNTY OF COLLIER)

Before me, the undersigned authority, on this day personally appeared Alan Codi, who executed the foregoing instrument in his personal (or authoritative) capacity indicated above and who is personally known to me or has produced _____ as identification and who did not take an oath.

30th WITNESS my hand and official seal in the County and State last aforesaid, this _____ day of December, 2005.



A handwritten signature in cursive script, appearing to read 'Susana Hernandez', written over a horizontal line.

Notary Public

Susana Hernandez

Printed Name of Notary

My Commission Expires: Aug. 10, 2008

ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for the above-stated limited liability company, at the place designated in Article VI of these Articles of Organization, the undersigned party hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete discharge of his duties.

Dated this 30 day of December, 2005.

A handwritten signature in cursive script, appearing to read 'Stanley Lieberfarb', written over a horizontal line.

Stanley J. Lieberfarb

This instrument prepared by:
STANLEY LIEBERFARB, PA.
1100 Fifth Avenue South, Suite 405
Naples, FL 34102