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01/09/06--01039--012 **/25.00



COVER LETTER

TO:	Registration Se Division of Co			
SUBJI	ECT:		ies of Fort Myers	s Beach, LLC
		(Name of Limite	d Liability Company)	
The en	closed Articles o	of Organization and fee(s) are s	ubmitted for filing.	
Please	return all corresp	pondence concerning this matte	er to the following:	
		Α.	J. Spiegel	
		(Name of Person)	
		Sunset Propertie	s of Fort Myers	Beach, LLC
			(Firm/Company)	
		8650 Enterprise I	orive, P.O. Box 50	0
			(Address)	
		Pe	eosta, lowa 52068	
		(City	/State and Zip Code)	
For fur	ther information	concerning this matter, please	call:	
	A. J. S	Spiegel	at (563)	556-7484
		e of Person)	(Area Code & Day	556-7484 rtime Telephone Number)
Enclos	sed is a check fo	or the following amount:		
\$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing For Certified Copy (additional copy is enclosed)	Certificate of Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier A Registration Sect Division of Corp Clifton Building 2661 Executive Tallahassee, FL	ion porations Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

3707 SE 16th Place	8650 Enterprise Drive	
Cape Coral, FL 33904	P.O. Box 50 Peosta, IA 52068	
The Limited Liability Company cannot serve business entity with an active Florida registra The name and the Florida street ad	·	dividual or another
	Sean Carey Clement	
	Name	
·	3707 SE 16th Place	- 202
F	lorida street address (P.O. Box NOT acceptable)	<u> </u>
Сат	pe Coral, FL 33904	
	City, State, and Zip	> '''
liability company at the place a registered agent and agree to act i statutes relating to the proper an	agent and to accept service of process for the lesignated in this certificate, I hereby accept in this capacity. I further agree to comply wand complete performance of my duties, and I position as registered agent as provided for in	t the appointment as vith the provisions of I am familiar with an

(CONTINUED) Page 1 of 2

<u>Title:</u>	Name and Address:
'MGR" = Manager	
"MGRM" = Managing M	1ember
MGRM	A. J. Spiegel
	8650 Enterprise Drive, P.O. Box 50 Peosta, IA 52068
	
Use attachment if necess	eary)
EV: Effective date, if of	ther than the date of filing: (OPTIO)
Use attachment if necess LE V: Effective date, if of fective date is listed, the days after the date of filing	ther than the date of filing: (OPTION date must be specific and cannot be more than five business
LE V: Effective date, if of ective date is listed, the c	ther than the date of filing: (OPTION date must be specific and cannot be more than five business
LE V: Effective date, if of ective date is listed, the days after the date of filing	ther than the date of filing: (OPTION date must be specific and cannot be more than five business (ing.)
LE V: Effective date, if of ective date is listed, the c	ther than the date of filing: (OPTION date must be specific and cannot be more than five business (ing.)
EV: Effective date, if of ective date is listed, the days after the date of filing	ther than the date of filing: (OPTION date must be specific and cannot be more than five business ong.) RE:
LE V: Effective date, if of ective date is listed, the days after the date of filing recognitions are supported as a signature of this do	ther than the date of filing: (OPTION date must be specific and cannot be more than five business (ang.) RE:

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)