

LO6000034824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

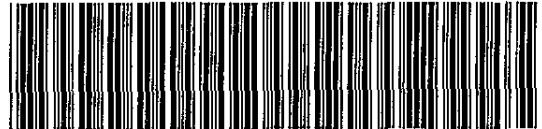
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

FLUC

Office Use Only

4/4



100068938451

03/30/06--01036--011 **125.00

06 MAR 30 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 23, 2006

CAROLINE A. GOODRICH
12907 CASTLEMAINE DRIVE
TAMPA, FL 33626

SUBJECT: VISTA LODGE LLC
Ref. Number: W06000014116

We have received your document for VISTA LODGE LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 306A00019933

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VISTA LODGE 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:

CAROLINE A. GOODRICH
(Name of Person)

(Firm/Company)

12907 CASTLEMAINE DRIVE

(Address)

TAMPA FL 33626

(City/State and Zip Code)

For further information concerning this matter, please call:

CAROLINE A. GOODRICH at (813) 852-6774 or
(Name of Person) (Area Code & Daytime Telephone Number)

(727) 408-0406

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)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 MAR 30 PM 12:15

APPROVED
AND
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VISTA LODGE LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

12907 CASTLEMAINE DRIVE
TAMPA FL 33626

12907 CASTLEMAINE DRIVE
TAMPA, FL 33626

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

CAROLINE A. GOODRICH
Name

12907 CASTLEMAINE DRIVE

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

TAMPA FL FL 33626

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..

Caroline A Goodrich

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 MAR 30 PM 12:16

FILED

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:

MGR

CAROLINE A. GOODRICH

12907 CASTLEMAINE DRIVE
TAMPA FL 33626

MGRM

JERRY D. GOODRICH

12907 CASTLEMAINE DRIVE
TAMPA FL 33626

MGRM

ROBERT A. FRANCIS

6702 GULF BLVD
~~NORFOLK~~ ST PETE BEACH, FL 33706

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Caroline A. Goodrich

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.)

CAROLINE A. GOODRICH

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 MAR 30 PM 12:16

APPROVED
AND
FILED