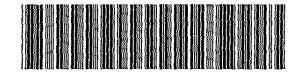
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SECRETARY OF STATE



## COVER LETTER

TO: Registration Sect Division of Corp				
SUBJECT: Sterling	Palm Properties, LL0	C		
		I Liability Company)	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of	Organization and fee(s) are su	abmitted for filing.		
Please return all correspon	ndence concerning this matte	r to the following:		
Scott Waltor	1			
	Q	Name of Person)		
Sterling Paln	n Properties, LLC			
	(1	Firm/Company)		•
13575 58th	St. N. Ste 200			
		(Address)		E4.
Clearwater,	FL 33760-3721			
	(City/	State and Zip Code)		
For further information co	oncerning this matter, please	call:		
Scott Walton		at (727 ) 520-3156	3	
(Name o	f Person)	at (727 ) 520-3156 (Area Code & Daytime Te	lephone Number)	
Enclosed is a check for	the following amount:			
	\$130.00 Filing Fee & Certificate of Status	S155.00 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns Pro	

FILED

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company i	S:
Sterling Palm Properties, LLC	
(Must end with the words "Limited Liability Company, "Lin	nited 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:
13575 58th St. N. Ste 200	2275 62nd Ave N #4012
Clearwater, FL 33760-3721	St. Petersburg FL 33702
business entity with an active Florida registration.)  The name and the Florida street address of the Scott Walton  Name	
2275 62nd Ave N #4012	
Florida street a	ddress (P.O. Box NOT acceptable)
St. Petersburg FL 33702	FL
City, State	e, and Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete accept the obligations of my position as region.	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as sity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

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

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member  MGRM  Scott Walton  2275 62nd Ave N #4012  St. Petersburg FL 33702  MGRM  Carol Williams  1884 Cameo Way  Clearwater, FL 33756  (Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:	"MGK" = Manag		Name and Address:	
MGRM  Scott Walton  2275 62nd Ave N #4012  St. Petersburg FL 33702  MGRM  Carol Williams  1884 Cameo Way  Clearwater, FL 33756  (Use attachment if necessary)	"MGRM" = Mar			
MGRM  Carol Williams  1884 Cameo Way Clearwater, FL 33756  (Use attachment if necessary)	MGRM		. Scott Walton	
MGRM  Carol Williams  1884 Cameo Way  Clearwater, FL 33758  (Use attachment if necessary)				<u> </u>
1884 Cameo Way Clearwater, FL 33756  (Use attachment if necessary)			St. Petersburg FL 33702	
1884 Cameo Way Clearwater, FL 33756  (Use attachment if necessary)	MGRM		Carol Williams	*==
Clearwater, FL 33758  (Use attachment if necessary)			1884 Cameo Way	
(Use attachment if necessary)				<del>-</del> .
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	CLE V: Effective	ted, the date must be sp	e of filing: (OPTIC ecific and cannot be more than five business	ONAL) days prio
REQUIRED SIGNATURE.	CLE V: Effective of fective date is lised the days after the days	ted, the date must be sp ate of filing.)	e of filing: (OPTIC ecific and cannot be more than five business	ONAL) days prio
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REQUIRED SIGNATURE:	CLE V: Effective of fective date is lised the days after the days	ted, the date must be sp ate of filing.)	e of filing: (OPTIC ecific and cannot be more than five business	ONAL) days prior
REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.	CLE V: Effective of fective date is lised the days after the days	ted, the date must be spate of filing.)  GNATURE:	ecific and cannot be more than five business	ONAL) days prior
Caul Williams	CLE V: Effective of fective date is lised the days after the days	ted, the date must be sporte of filing.)  GNATURE:  Signature of a member or (In accordance with section of this document constitute:	an authorized representative of a member.  608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury	ONAL) days prior
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.)	CLE V: Effective of fective date is lised the days after the days	signature of a member or of this document constitutes that the facts stated herein	an authorized representative of a member.  608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury in are true.)	ONAL) days prior
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	CLE V: Effective of fective date is lised the days after the days	signature of a member or of this document constitutes that the facts stated herein	an authorized representative of a member.  608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury in are true.)	ONAL) days prio

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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