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DIVISION OF CORPORATIONS
06 SEP -5 PM 2: 37

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TRANSMITTAL LETTER

TO:	Registration S Division of Co			
SUBJ	ECT:	FIELDSTONE (Name of Limite	2, LLC ed Liability Company)	
The en	closed Articles	of Organization and fec(s) are		
		pondence concerning this matt	-	
			J. Buck, Accountant	
		Naples, F	जन्म जिप्पाson) FL 34109	
·		((Firm/Company)	
				SECRETARY OF ORAFIONS DIVISION OF CORPORAFIONS 06 SEP -5 PM 2: 37
		······································	(Address)	OF COR
				5 PH 2: 37
		(City.	/State and Zip Code)	3 Og
For furt	Herbert J. 5405 Jaeg	concerning this matter, please Buck, Accountant er Rd.	call: at (239) 5/4- (Area Code & Daytime To	4244
	Naples	·844 09	(Area Code & Daytime To	elephone Number)
Enclos	ed is a check fo	or 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)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compar	ny is:
FIELDSTONE 2,	LLC
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
634 Shoreline Drive	634 Shoreline Dr.
Naples, Fl 34119	Naples, Fl 34119
ARTICLE III - Registered Agent, Regist	the registered agent are:
MICHAEL V. C	AVASENO ST
,	lame P

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..

FL 34119 City, State, and Zip

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

Registered Agent's Signature

634 Shoreline Dr

Naples

(CONTINUED)

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

سب ر ء ن

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

Title: "MGR" = Manager	Name and Address:	-
"MGRM" = Managing Member		
MGR	MICHAEL V. CAVASENO 634 Shoreline Dr. Naples, Florida 34119	
		_ 1 2 27
		DIVISION
• • • • • • • • • • • • • • • • • • • •		FRED CORPOR
(Use attachment if necessary)		STATEUS H 2: 37
NOTE: An additional article must l	be added if an effective date is requested.	

REQUIRED SIGNATURE:

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.)

MICHAEL V. CAVASENO

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)