Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0383

Account Number : FILINGS, INC.

L. Account Number : 072720000101

C. Phone : (850)385-6735

Pax Number : (954)641-4192

FLORIDA/FOREIGN LIMITED LIABILITY CO.

STATE ROAD 29, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$125.00 |

Electronic Filing Menu Corporate Filing Menu

Help

106000260697

| The name of the Limited Liability Con | npany is: | |
|--|---|-------------|
| State Road 29, LLC | any, "Limited Company" or their abbroviation "LLC," or "L.C.,") | |
| | any, Emilion Company of the accountance and, or more | |
| ARTICLE II - Address: | Cat | |
| The mailing address and street address | of the principal office of the Limited Liability Compa | my 1s. |
| Principal Office Address: | Malling Address: | |
| 3100 North Road | 3100 North Road | 78 OG |
| Naples, FL 34104 | Naples, FL 34104 | |
| | | AHAMATI Z |
| | legistered Office, & Registered Agent's Signature: n own Registered Agent. You must designate an individual or snother | SEE THE THE |
| The name and the Fkmida street address | ss of the registered agent are: | |
| The name and the Florida street address | ss of the registered agent are: | H 8: 39 |
| , | | |
| The name and the Florida street address John R. Nebus | Name | |
| The name and the Florida street address John R. Nebus 3100 North Rose | Name | |
| The name and the Florida street address John R. Nebus 3100 North Rose | Name | |
| The name and the Florida street address John R. Nebus 3100 North Rose Florida Naples, FL 34104 | Name ad da street address (P.O. Box <u>NOT</u> acceptable) 4 FL | |
| The name and the Florida street address John R. Nebus 3100 North Rose Florida Naples, FL 34104 | Name ad da street address (P.O. Box <u>NOT</u> acceptable) | |

(CONTINUED) Page1 of 2

Registered Agent's Signature (REQUIRED)

166000260691

16600260697

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

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

| | <u>Title:</u> "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
|--------|--|---|
| | MGRM | John R. Nebus 3100 North Road Naples, FL 34104 |
| | | |
| | | SECRETA FALLAHAS |
| ÷,,,, | (Use attachment if necessary) | NY OF S |
| (If an | effective date is listed, the date must be specified age after the date of filing.) REQUIRED SIGNATURE: Signature of a member of | pecific and cannot be more than five business days prior The prior of a recentor. |
| | of this document constitut that the facts stated here School | on 608.408(3), Florida Statutes, the execution test an affirmation under the penalties of perjury cin are true.) Republic Or printed name of signer |
| | Filing Fees: | |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.60 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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