

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000295151 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL, P.A.

Account Number : 076077000521 Phone : (954)527-2428 : (954)333-4001 Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY

Charleston Bay, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION OF CHARLESTON BAY, LLC a Florida limited liability company

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida does set forth the following:

- 1. <u>NAME</u>. The name of the limited liability company is CHARLESTON BAY, LLC (the "Company").
- MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 401 South Albany Avenue, Tampa, Florida 33606.
- 3. <u>REGISTERED AGENT</u>. The name and address of the initial registered agent in the State of Florida, whose consent to appointment as Registered Agent accompanies these Articles of Organization are: Nelson Striner, 401 South Albany Avenue, Tampa, Florida 33606.

The undersigned has executed these Articles of Organization on the 13 day of December, 2006.

BY: Well-

Nelson Steiner, Authorized Representative

TPA:485797:4

5...

CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

ı.	The name of the limited liability company is: CHARLESTO	N BAY.	LLE.	
2.	The name and address of the registered agent and office are:	3 01	DEC	7
	120	is ¥	_	
	Nelson Steiner			m

Nelson Steiner 401 South Albany Avenue Tampa, Florida 33606

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 its 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.

Nelson Steiner, Registered Agent

12-13-06

(Date)

TPA:485797:1