

L070000094605

Florida Department of State  
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.**

(((H07000230835 3)))



H070002308353ABC

**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 : THE FARR LAW FIRM  
Account Number : 103654001666  
Phone : (941) 639-1158  
Fax Number : (941) 639-0028

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 SEP 17 AM 8:29

RECEIVED

07 SEP 17 AM 11:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## North Port Vacant Land Co., LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

JB

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I — Name:**

The name of the Limited Liability Company is:

**NORTH PORT VACANT LAND CO., LLC**

**ARTICLE II — Address:**

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

**Mailing Address:**

**c/o DAVID A. HOLMES  
Farr, Farr, Emerich, Hackett and Carr, P.A.  
99 Nesbit Street  
Punta Gorda, Florida 33950**

**Street Address:**

**c/o DOMINIC MAURO  
1200 Mallard Marsh Drive  
Osprey, FL 34229**

**ARTICLE III — Registered Agent, Registered Office, & Registered Agent's Signature:**

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

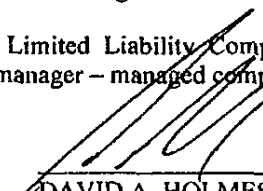
**DAVID A. HOLMES  
Farr, Farr, Emerich, Hackett and Carr, P.A.  
99 Nesbit Street  
Punta Gorda, Florida 33950**

*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.*

  
\_\_\_\_\_  
DAVID A. HOLMES, Registered Agent

**ARTICLE IV — Management**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager — managed company.

  
\_\_\_\_\_  
DAVID A. HOLMES, Authorized Representative of a Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FILED  
STATE  
SECRETARY OF  
DIVISION OF CORPORATIONS  
07 SEP 17 AM 8:29