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(R	equestor's Name)	_
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates of	of Status
Special Instructions to	Filing Officer:	,
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2001 OCT 31 P 1: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

Division of Co			
SUBJECT: Chass	sowitzka Holdin	ngs "LLC"	
		ted Liability Company)	_
The enclosed Articles of	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
Philip D.	Ruck		
		(Name of Person)	
		(Firm/Company)	
14321 R	iver Road		
		(Address)	
Fort Mye	rs, FL 33905	SE	200
	(Cit	ty/State and Zip Code)	700) OCT 31
For further information of	concerning this matter, please	e call:	3
Beverly J. Ru	uck	_at 239 693-1142	
(Name	of Person)	(Area Code & Daytime Telephone Number)	40b
Enclosed is a check fo	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Certificate of S Certified Copy (additional copy is	Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Chassowitzka Holdings "LLC"	
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
14321 River Road	14321 River Road
Fort Myers, FL 33905	Fort Myers, FL 33905
ARTICLE III - Registered Agent, Registered of The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re Philip D. Ruck Name 14321 River Road Florida street addr Fort Myers, FL 33 City, State, an	red Agent. You must designate an individual or another gistered agent are: Ress (P.O. Box NOT acceptable) 3905
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

"MGR" = Manager "MGRM" = Managing Member		
Philip D. Ruck "MGR"	Philip D. Ruck	
	14321 River Road	
	Fort Myers, FL 33905	
Beverly J. Ruck "MGRM"	Beverly J. Ruck	
	14321 River Road	7A'S
	Fort Myers, FL 33905	Ec.
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(Use attachment if necessary)		
(Ose acaemient it necessary)		
LE V: Effective date, if other than the	e date of filing:	. (OPTION
	pe specific and cannot be more that	
	-	
days after the date of filing.)		

(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.)

Beverly J. Ruck "MGRM"

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)