## 107000123273

(Requestor's Name)				
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



000113016940

12/11/07--01017--004 \*\*125.00

07 DEC 11 PH 12: 28

SECRETARY OF STATE DIVISION OF CORPORATIONS

## **COVER LETTER**

Division of Co				
<sub>SUBJECT:</sub> Ande	rson Naples Hold	ing, L.L.C.		
SUBJECT.		Liability Company)		
The enclosed Articles of	of Organization and fee(s) are sub	mitted for filing.		
Please return all corresp	condence concerning this matter t	to the following:		
William (	C. Hanson			
-	(Na	ime of Person)		
Denison	Mulvoy, PLC			
	(Fi	rm/Company)		
1750 S.	Telegraph Road,	Suite 301		
<del></del>		(Address)	1	ON S
Bloomfie	eld Hills, MI 4830	2		PC SSE
		tate and Zip Code)		400
For further information	concerning this matter, please ca	ıll:		OT DEC 11 PH 12: 28
William C. H	anson	, 248 253-110	00	: 28
	e of Person)	(Area Code & Daytime Tele	phone Number)	
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee Certificate of State Certified Copy (additional copy is end	us &
	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 C Tallahassee, FL 32301	ircle	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	' is:	
Anderson Naples Holding, I	L.C.	
	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Limited Liab	oility Company is:
Principal Office Address:	Mailing Address:	•
4651 Gulfshore Blvd., N.		
Naples, FL 34103		
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	ered Office, & Registered Agent's S Registered Agent. You must designate an individu	Signature: nal or another
The name and the Florida street address of t	he registered agent are:	FILED STATE IN SECRETARY OF STATE OF CORPORATION OF CORPORATION OF DEC 11 PH 12: 28
Andrew C. Anderson		C SEF
Na	ame	- CRE
4651 Gulfshore	Blvd., N.	PH I
	t address (P.O. Box NOT acceptable)	2: 2
Naples	<sub>FL</sub> 34103	SK SK
City, Sta	ate, and Zip	

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member Andrew C. Anderson **MGRM** 4651 GWFSHORE WAPLES, FLA. (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

Andrew C. Anderson

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee