# 0900027332

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

à.

Office Use Only



03/19/09--01034--013 \*\*125.00

FILED 2019 HAR 19 PM 12: 23 SECRETARY OF STATE SECRETARY OF STATE

T. CLINE MAR 2.0 2009

EXAMINER

# \* SHIPP, O'NEILL & POHL, LLP Attorneys At Law

Thomas E. Shipp, Jr. John E. O'Neill Michael A. Pohl

4223 Del Prado Boulevard Cape Coral, Florida 33904 Phone: (239) 542-1131 Fax: (239) 549-9862 Email: attorney@soplawfirm.com

ava 695

0

S HL

N

March 13, 2009

Secretary of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

# RE: ARTICLES OF ORGANIZATION OF CARTERMAR, LLC

Dear Sir or Madam:

Enclosed is our check in the amount of \$125.00 to cover the cost of filing the enclosed Articles of Organization for the above-referenced LLC. Please return a stamped copy of the Articles to our office in the enclosed, self-addressed, stamped envelope which has been provided for your convenience.

Thank you for your assistance and please feel free to call should you have any questions.

Sincerely

THOMAS E. SHIPP, JR.

TES:dlg Enclosures

# ARTICLES OF ORGANIZATION

### OF

### CARTERMAR, LLC

The undersigned, acting under the provisions of Chapter 608 of the Florida Statutes entitled the Florida Limited Liability Company Act (the "Act"), for the purpose of forming a limited liability company under the laws of the State of Florida, do set forth the following:

### Name

The name of the limited liability company is CARTERMAR, LLC (hereinafter referred to as the "Company").

### Period of Duration

The period of duration of the Company shall begin at 12:00 A.M. on April 1, 2009 and continue in perpetuity unless earlier terminated under the Act or the Operating Agreement

### Purpose

The purpose for which the Company is organized is to engage in any and all business and activities permitted by the Act and any other applicable laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

### Address Of Place Of Business

The mailing address for the Company is Post Office Box 153073, Cape Coral, Elorida 33915-3073, and the street address of the place of business for the Company is 3505 SE. 8th Avenue, Cape Coral, Florida 33904. These addresses may be changed from time to time as 70 provided in the Operating Agreement.

ڡ

PH

ش

### **Registered Agent**

The initial registered agent in Florida for the Company is MARIA C. PALMA, and the initial registered office is located at 3505 S.E. 8th Avenue, Cape Coral, Florida 33904.

### **Capital Contributions**

Contributions to the capital of the Company shall be made by the members, in the manner prescribed by the written Operating Agreement made and entered into by the members and which may be amended from time to time in accordance with its terms.

### Members

The Company shall always have at least one member and may admit additional members on the prior unanimous written agreement of the then existing members, or as otherwise provided in the Operating Agreement.

# Management

The overall management and control of the business and affairs of the Company shall be vested in its members, as provided in these Articles of Organization and section 608.407 of the Act. Any and all action by the Company shall require the vote of members holding a majority interest in the Company.

# Indemnification

Except as expressly provided in the Operating Agreement, the Company shall indemnify any member, manager, or former member or manager to the full extent permitted under the Act.

Executed on this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_ . 2009.

MARIA C. PALMA, Managing Member

By:

# TERESITA LaROSA, Managing Member

# ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in these Articles, 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.

2009 Registered Agent's Signature 2  $\overline{\mathbb{Q}}$