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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Cape Coral Trust, LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Russell A. Frost Name of Person
Firm/Company
3036 Lake Butler Court
Cape Coral, FL. 33909 City/State and Zip Code Frosty Md @ comcast. net Email address: (to be used for future annual report notification)
Frosty Md @ comeast net Email address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Russell A, Frost at (410) 274-8111 The Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Cape Coral Trus	
ARTICLE II - Address: The mailing address and street address of the part of th	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3036 Lake Butter Court	3036 Lake Butler Ct.
Cape Coral, Florida 33909	Cape Coral, Florida 33909
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	

3036 Lake Butler Cour Florida street address (P.O. Box NOT acceptable) Cape Coral FL 33909
City, State, and Zip

Russell A. Frost Name

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

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)

Page 1 of 2 (CONTINUED)

MGAM Russell A, Frost 3036 Lake Butler Ct. Cape Coral, Fl. 33909 (Use attachment if necessary)	<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
	MGRM	
	(Use attachment if necessary)	<u> </u>
	days after the date of filing.)	
DECLIDED SIGNATUDE.	MANUAL STORMS	
DECLIDED SIGNATUDE.		
DECLIDED SIGNATUDE.	Signature of a men	mber or an authorized representative of a member.
REQUIRED SIGNATURE:	(In accordance with of this document c	h section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of periury

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)