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DEPARTMENT OF STATE
DIVISION OF CORPORATION

B. KOHR MAR 2 6 2010

EXAMINER

OVAISION OF CORPORATIONS

10 MAR 26 PM 3: 30



ACCOUNT NO. : I2000000195

REFERENCE: 330245 4308005

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: March 26, 2010

ORDER TIME: 11:57 AM

ORDER NO. : 330245-015

CUSTOMER NO: 4308005

DOMESTIC FILING

NAME: CLERMONT LEASING COMPANY, LLC

EFFECTIVE DATE:

XX	ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE	RETURN THE FOLLOWING AS PROOF OF FILING:
XX	CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT	PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS:

	3
ARTICLES OF ORGANIZATION FOR FI	LORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	:
Clermont Leasing Company, LLC	
(Must end with the words "Limited Lish)	lity Company, "L.L.C.," or "LL.C.")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1675 Palm Beach Lakes Boulevard	SAME
Suite 900	
West Palm Beach, Florida 33401	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	need Agent. You must designate an individual or another
The name and the Florida street address of the t	egistered agent are:
Spector Gadon & Rosen	ı, LLP
Name	
360 Central Avenue, Su	uite 1550
Florida street add	iress (P.O. Box <u>NOT</u> acceptable)
St. Petersburg	FL 33701
City, Suate, a	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..

Spector Glacon & Rosen, LLP
BY:

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Harry Dillon Madonna
	1675 Palm Beach Lakes Blvd, Suite 900
	West Palm Beach, FL 33401
MGR	Brenda Davis
	1675 Palm Beach Lakes Blvd Suite 90
	West Palm Beach, FL 3340
MGR	leanette lames
	1675 Palm Beach Lakes Blvd., Suite 900
	West Palm Beach, FL 3340
fective date is listed, the date n	an the date of filing:, (OPTION, nust be specific and cannot be more than five business da
LE V: Effective date, if other th	an the date of filing: (OPTION, nust be specific and cannot be more than five business da
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE:	nust be specific and cannot be more than five business da

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Filing Fees: