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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

J. BRYAN
DEC: -8 2010

EXAMINER

COVER LETTER

то:	Registration Division of	n Section Corporations	•	
SUBJI	ECT. Trop	ic Views L.L.C.		
	şi (5)	Name of Limited	l Liability Company :	# # * 45 · · · · · · · · · · · · · · · · · ·
The en	closed Articles	s of Organization and fee(s) are su	ubmitted for filing.	
Please	return all corre	espondence concerning this matte	r to the following:	
	Konnoti	n E. Bryant		
	Kenneu		Name of Person	
	Tropic \	/iews "L.L.C."		
	•		Firm/Company	
	461 7th	Place		F 22 6
			Address	CRE CRE
	Vero Bea	ach, Florida 32962	2	ASS -1
		•	/State and Zip Code	1 PH 2
	semipro6	@comcast.net	or future annual report notification)	FLOOR 2:
For fu	rther informati	on concerning this matter, please		RIDA
Kan	neth E. Br	vant	et (772) 559-7065	
1011		me of Person	at (772) 559-7065 Area Code & Daytime Telepho	ne Number
		c for the following amount:		·
]\$ 125.0	0 Filing Fee	✓ \$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
		Mailing Address Registration Section	Street/Courier Address Registration Section	
		Division of Corporations	Division of Corporations	
		P.O. Box 6327	Clifton Building	ما

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Tropic Views "L.L.C."
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

ARTICLE I - Name:

Mailing Address:

461 7th Place	461 7th Place
Vero Beach, Florida	Vero Beach, Florida
32962	32962

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

Effective Date 0/02///

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

Kenneth E. Bryant		Pro	
·	Name	1. SEC. 9	
461 7th Place		DEC ORET AAHA	\$ 10°
Florida str	eet address (P.O. Box NOT acceptable)	ω · υ	
Vero Beach	_{FL} 32962	7 P	
C	City, State, and Zip	H 2:	M D

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)

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

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

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGR	Kenneth E. Bryant	
	461 7th Place	-
	Vero Beach, Florida 32962	
MGR	Nancy E. Caulfield	
	534 7th Place	
	Vero Beach, Florida 32962	
		DEC -7 PM 2: CRETARY OF ST LAHASSFE, FLI
(Use attachment if necessary)		: 39 DATE ORIT
CLE V: Effective date, if other than the effective date is listed, the date must b		(OPTIONAL)
90 days after the date of filing.)		
DECHIDED CICNATUDE.		

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

In accordance with section 609 409/2). Florido Statutos the according of this decree

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Kenneth E. Bryant

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)