

L11000007577

SHEPPARD, BRETT, STEWART  
HERSCH, KINSEY & HILL PA  
9100 COLLEGE POINTE COURT  
FORT MYERS, FL 33919  
239-334-1141

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300189995963

01/18/11--01028--019 \*\*375.00

FILED  
11 JAN 18 PM 3:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

JAN 19 2011

EXAMINER

# Articles of Organization of AMS Family I, LLC

The undersigned, for the purpose of forming a Limited Liability Company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

## Article One Name

The name of the Limited Liability Company is **AMS Family I, LLC**.

## Article Two Registered Agent

The initial registered agent of the Company is: **Michael B. Hill**. The registered address of the Company is: **9100 College Pointe Court, Fort Myers, Florida 33919**.

## Article Three Principal Office

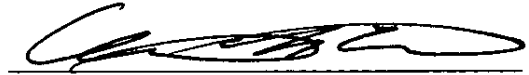
The mailing and street address of the principal office of the Company are: **9100 College Pointe Court, Fort Myers, Florida 33919**.

## Article Four Management and Purpose

The Company shall be a manager-managed company, and shall initially be managed by **Ann Marie Shields**. The Operating Agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with the law or these Articles of Organization. The general purpose of the Company is to perform any lawful business, including the family management of family interests, within or without the State of Florida.

**FILED**  
11 JAN 18 PM 3:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned members have made and subscribe these Articles of Organization at Fort Myers, Florida, for the foregoing uses and purposes on December 9, 2010.

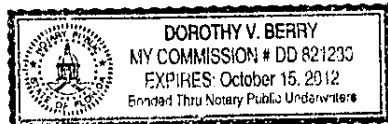


Michael B. Hill, authorized  
representative of the Members

STATE OF FLORIDA  
COUNTY OF LEE

The foregoing instrument was acknowledged before me on December 9, 2010, by Michael B. Hill, who (✓) is personally known to me or who ( ) has produced N/A as identification.

(Seal)



My Comm. Expires:  
My Comm. No.:

  
Notary Public **DOROTHY V. BERRY**

Printed Notary Signature

## Acceptance of Registered Agent

Having been named as registered agent and to accept service of process for **AMS Family I, LLC**, at the place designated herein, 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. I am familiar with and accept the obligations of my position as registered agent, as provided for in Chapter 608, Florida Statutes.



Michael B. Hill

Date : December 9, 2010

**FILED**  
11 JAN 18 PM 3:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA