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SECRETARY OF STATE
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EXAMINER

**FAX AUDIT NO.:** 

## ARTICLES OF ORGANIZATION OF CAptiva39, LLC

#### **ARTICLE I-NAME**

The name of the limited liability company shall be CAptiva39, LLC (the "Company").

#### **ARTICLE II-MAILING AND STREET ADDRESS**

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

29409 Windmill Court Farmington Hills, MI 48334

#### ARTICLE III-EFFECTIVE DATE

This limited liability company's existence shall commence upon the filing of the Articles and shall terminate as provided for in the Operating Agreement.

#### **ARTICLE IV-INITIAL REGISTERED AGENT AND OFFICE**

The name and street address of the initial registered agent of the Cor

Name

**Address** 

David K. Fowler

1648 Periwinkle Way, Suite B Sanibel, FL 33957

#### ARTICLE V-PURPOSE

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

#### ARTICLE VI-MANAGEMENT OF THE COMPANY

The Company shall be managed by not less than one (1) manager (the "Manager") and is, therefore, a manager-managed company. The following is the name

FAX AUDIT NO .:

#### **FAX AUDIT NO.:**

and address of the initial Managers who shall serve as the Managers of the Company until a successor is elected and qualified:

<u>Name</u>	<u>Address</u>
Frances C. O'Laughlin	29409 Windmill Court Farmington Hills, MI 48334
Alice N. Griswold	16673 Forest Gate Dubuque, IA 52001

#### **ARTICLE VII-OPERATING AGREEMENT**

The Members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

The undersigned, being an authorized representative of the Members of the Company, has executed these Articles of Organization this 14th day of January, 2011.

David K. Fowler

Authorized Representative



**FAX AUDIT NO.:** 

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: CAptiva39, LLC.
- 2. The name and address of the registered agent and office is:

David K. Fowler 1648 Periwinkle Way, Suite B Sanibel, FL 33957

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.

David K. Fowler

Registered Agent