

L11000037038

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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

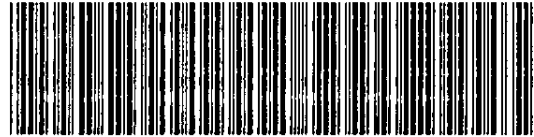
Special Instructions to Filing Officer:

**L. SELLERS**

MAR 28 2011

**EXAMINER**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DONNELLY & RUSSO, P.A.**

ATTORNEYS AT LAW

3708 W. EUCLID AVENUE, TAMPA, FLORIDA 33629

**SEAN V. DONNELLY\***

**JOSEPH C. RUSSO**

\*ALSO ADMITTED IN ILLINOIS

(813) 832-9790 PHONE

(813) 832-9739 FAX

March 23, 2011

Secretary of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Filing of Articles of Organization for Florida Gulf Coast Vacation Homes,  
LLC

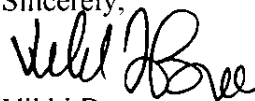
To Whom It May Concern:

Please find enclosed the Articles of Organization for referenced limited liability company, along with a check for \$130.00 for the filing fees.

Please file the Articles of Organization and provide our office with a Certificate of Status.

Thank you for your attention to this matter. If you have any questions, please feel free to contact me.

Sincerely,



Vikki Brown

Legal Assistant to Joseph C. Russo

Enc.

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

The undersigned hereby organizes a Limited Liability Company in accordance with the Florida Statutes and pursuant to the following Articles of Organization.

**ARTICLE 1**

**Name**

The name of this Limited Liability Company is: **Florida Gulf Coast Vacation  
Homes, LLC**

**ARTICLE 2**

**Mailing Address & Principal Office Address**

The mailing address and principal office of this Limited Liability Company is: **5111  
Memorial Hwy, Tampa, Fl. 33634.**

**ARTICLE 3**

**Initial Registered Office and Agent**

The street address of the initial registered office of this Limited Liability Company is **5111 Memorial Hwy, Tampa, Fl. 33634**, and the name of the initial registered agent of this Limited Liability Company at that address is **Joseph Varner**.

**Acceptance of Registered Agent**

*Having been named as registered agent to accept service of process for the above-stated Limited Liability Company at the place designated in this certificate, I hereby accept the appointment of 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 in Chapter 608, Florida Statutes.*

\_\_\_\_\_  
**Joseph Varner**

**ARTICLE 4**

**Managers/Managing Members**

This Limited Liability Company is to be managed by the following Managing Members (MGRM):

- 1) **Joseph Varner - 5111 Memorial Hwy, Tampa, Fl. 33634; and**

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**TALLAHASSEE, FLORIDA**

2) Kelley Varner - 5111 Memorial Hwy, Tampa, FL 33634

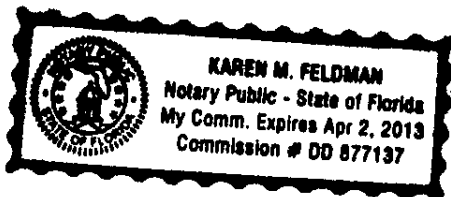
IN ACCORDANCE WITH section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true and correct. The undersigned is authorized and has executed these Articles, this 22 day of MARCH, 2011.

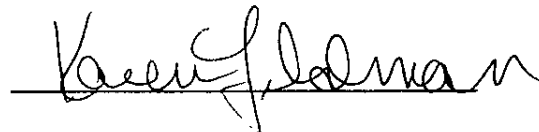
  
\_\_\_\_\_  
**Joseph Varner**  
Authorized Managing Member

**STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH**

The foregoing instrument was acknowledged before me this 22nd day of March, 2011 by **Joseph Varner**.

SEAL



  
\_\_\_\_\_  
Type, Print or Stamp Name of Notary

Personally known \_\_\_\_\_

or Produced Identification ☒

Type of Identification Produced Fl. Driver's

License