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SECRETARY OF STATES
TALLAHASSEF, FIORIDA

C. LEWIS

MAY 1 7 2011

EXAMINER

COVER LËTTER

TO: , Registration Section Division of Corporati	ons			
SUBJECT: DISTINCT HOME RENTALS, LLC.				
30 3 000001.		ed Liability Cor		
The enclosed Articles of Organi	zation and fee(s) are	submitted for fi	ling.	
Please return all correspondence concerning this matter to the following:				
A.J. FIZELL				
		Name of Person		
DINSTINCT HOME RENTALS, LLC.				
Firm/Company				
P.O. BOX 181	38			
		Address		
CLEARWATER, FL 33762				
City/State and Zip Code				
DISTINCTPROPI				
E-ma	iil address: (to be used	for future annual i	report notification)	
For further information concern	ing this matter, please	e call:		
A.J. FIZELL		_{at (} 813	, 919-930	6
Name of Person	1	Area C	ode & Daytime Te	elephone Number
Enclosed is a check for the fo	llowing amount:			
	.00 Filing Fee & cificate of Status	Certified (iling Fee & Copy copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis P.O.	ing Address tration Section ion of Corporations Box 6327 hassee, FL 32314	Regist Divisi Clifto 2661 I	/Courier Addres ration Section on of Corporation Building Executive Center lassee, FL 32301	ons · Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. - Name:

The name of the Limited Liability Company is DISTINCT HOME RENTALS, LLC. (hereinafter referred to as the "Company").

ARTICLE II. – Principal Place of Business:

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

Principal Office Address:

Mailing Address:

2914 Pine Cone Cir. Clearwater, FL 33760 P.O. Box 18138 Clearwater, FL 33762

ARTICLE III. – Purpose and Powers:

The purpose for which this Company is organized is any and all lawful business.

Article IV. - Name and Address of Registered Agent:

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

Harvey L. Kasper II 2914 Pine Cone Cir. Clearwater, FL 33760

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 Signature:

ARTICLE V. - Management:

The Company shall be managed by separate managers. The company shall be considered "manager-managed."

ARTICLE VI. - Managers

The names and addresses of the persons who will be serving as managers are as follows:

Title:	Name and Address:	
Manager (MGR)	Harvey L. Kasper II P.O. Box 18138 Clearwater, FL 33762	ALCON TO CO
Manager (MGR)	Arthur L. Fizell Jr. P.O. Box 18138 Clearwater, FL 33762	TS CELLIS A CONTROL OF THE SECOND OF THE SEC

ARTICLE VII. - Indemnification of Managers and Members

Section A

Under the current law, including any amendments hereafter, each manager or member shall be entitled to the fullest indemnification available to them.

Section B

Each manager or member shall be liable to the Company for the following actions:

- 1. The breach of the manager's or member's loyalty to the Company, or its members.
- 2. To be liable hereunder, the manager in question must have acted in a malicious or grossly negligent manner, as defined by law.
- 3. A transaction in which the manager benefits to the detriment of the Company or its members.
- 4. An action for which there is no indemnification provided by law.

Section C

This indemnification shall not deter or cancel out other rights to which the manager or member is entitled.

Signature of a member or an authorized representative of a member

Harvey L. Kasper II, MGR