

L11 000065370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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EXAMINER



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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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Dinsmore&Shohl^{LLP}
ATTORNEYS

Nathan E. Hagler
513-977-8535
nathan.hagler@dinslaw.com

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SECRETARY OF STATE
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June 1, 2011

Florida Department of State
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

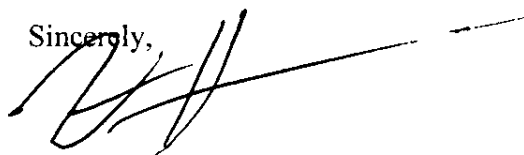
Re: *Victus Somnium, LLC - Articles of Organization Filing*

Dear Sir or Madam:

Enclosed you will find a cover letter and a filing of Articles of Organization for a Florida Limited Liability Company, Victus Somnium, LLC, along with a check in the amount of \$125 for the applicable filing fee.

If you have any questions, please feel free to contact me.

Sincerely,



Nathan E. Hagler

NEH:skn

Enclosures

1923944_1

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Victus Somnium, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter A. Draugelis

Name of Person

Dinsmore & Shohl, LLP

Firm/Company

255 East Fifth Street, Suite 1900

Address

Cincinnati, Ohio 45202

City/State and Zip Code

peter.draugelis@dinslaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter A. Draugelis

Name of Person

at (513) 977-8415

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Victus Somnium, LLC

(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:

14001 Gulf Blvd. #201
Madeira Beach, FL 33708

Mailing Address:

11814 Suncrest Drive
Walton, KY 41094

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.)

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

CT Corporation System

Name

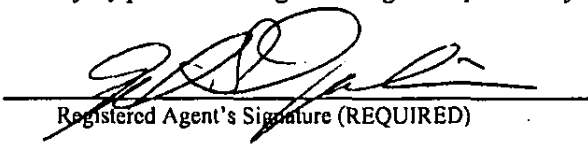
1200 South Pine Island Road

Florida street address (P.O. Box **NOT** acceptable)

Plantation, FL 33324

City, State, and Zip

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)

Ch S. Apollo, Asst. Secretary

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Lori Rosenberger

11814 Suncrest Drive

Walton, KY 41094

MGRM

James Rosenberger

11814 Suncrest Drive

Walton, KY 41094

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


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

(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.)

James Rosenberger

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)