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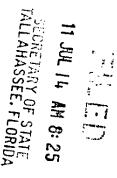
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
	PICK-UP WAIT MAIL
ľ	(Business Entity Name)
	(Document Number)
	Certified Copies Certificates of Status
	Special Instructions to Filing Officer:
	W11000034863

Office Use Only



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D. BRUCE

JUL 15 2011

EXAMINER

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 29, 2011

GINA HOLLIS PO BOX 11611 OVERLAND PARK, KS 66207

SUBJECT: THE COTTAGE LLC Ref. Number: W11000034863

SECRETARY OF STATE

We have received your document for THE COTTAGE LLC and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 711A00015662

COVER LETTER

	tion Section of Corporations		
_{subject:} Th	e Cottage LLC		,
	Name of Limited L	Liability Company	
	cles of Organization and fee(s) are sub	_	
Please return all c	orrespondence concerning this matter to	o the following:	
Gina l	Hollis		
		me of Person	
	Fir	m/Company	
DO B	ox 11611		rama'
<u> </u>	UX TIUTT	Address	<u> </u>
		Trudiess	
Overlar	nd park, KS 66207		AR ASS
	City/St	ate and Zip Code	AH Y OF
gina@e	englewoodbeachhouse.com		TS OF
For further inform	E-mail address: (to be used for fination concerning this matter, please cal		# 25 TATE ORIDA
Gina		(860) 577-8052	
•	Name of Person	Area Code & Daytime Telephone Numl	ber
	eck for the following amount:		
√] \$125.00 Filing Fe	ce \$130.00 Filing Fee & Certificate of Status	Certified Copy Certified Copy is enclosed) Certified	Filing Fee, ate of Status & d Copy al 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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability	Company is:
	he Englewood Beach House CoHage LLC s"Limited Liability Company, "L.L.C.," or "LLC.")
(Must end with the word	"Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street add	ress of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:

T I III CIDAT O III CO TIGUI COST			
5008 W 112th Terrace	PO Box 11611		2 × 2
Leawood, KS 66211	Overland Park, KS 66207		
		$\frac{\vec{\lambda}}{\vec{\lambda}}$	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the	gistered Agent. You must designate an indi	ividual or Another I F	
Bill Bingham		8: 25 STATE LORIDA	-
Nam	ne	25 NDA	
15126 Wichita		-	
Florida street a	address (P.O. Box NOT acceptable)		
Port Charlotte	_{FL} 33981		
City	State and Zin		

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..

BUL Busham

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

#NACD# = NA	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Gina Hollis
	5008 W 112th Terrace
	Leawood, KS 66211
MGR	Dan Dorazil
	12201 Windy Trail
	Parker, CO 80138
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: (OPTIONAL) be specific and cannot be more than five business days p
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	

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)