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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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T. HAMPTON SAMINER

COVER L'ETTER

Registration Section Division of Corporations

TO:

SUBJECT: Cab	ana Club Rental C	community, LLC
		led Liability Company
The enclosed Articles	s of Organization and fee(s) are	submitted for filing.
Please return all corre	espondence concerning this matt	ter to the following:
Donna I	Hurt	,
		Name of Person
Perimet	er Realty, Inc	
· · · · ·		Firm/Company
8711-11	Perimeter Park Bl	vd.
		Address
Jacksonv	ille, FL 32216	
		ty/State and Zip Code
dhurt@pe	rimeter-realty.com	
	it-mail address: (to be used t	for future annual report notification)
For further information	on concerning this matter, please	e call:
Donna Hurt		at (904) 641-0018
Nan	ne of Person	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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Cabana Club Rental Community, 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:	Mailing Address:
8711-11 Perimeter Park Blvd.	8711-11 Perimeter Park Blvd.
Jacksonville, FL 32216	Jacksonville, FL 32216
	_

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:

Donald C. Fort	
	Name
8711-11 Per	rimeter Park Blvd.
Florida	street address (P.O. Box NOT acceptable)
Jacksonville	_{FL} 32216
	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)

(CONTINUED)

Page 1 of 2

STATSTOR OF CORPORATIONS

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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:

"MGRM" = Managing Member	
MGRM	Donald C. Fort
	8711-11 Perimeter Park Blvd
	Jacksonville, FL 32216
(Use attachment if necessary)	
LEV: Effective date, if other than	n the date of filing: (OPTION
ffective date is listed, the date mu days after the date of filing.)	ist be specific and cannot be more than five business da

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.)

Donald C. Fort

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)

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