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G. MCLEOD

AUG - 9 2011

EXAMINER



200210752942

08/08/11--01039--035 **260.00

COVER LETTER

TO: Registration S Division of Co			
_{subject:} Harbo	or Inn of Venice,	IIC	
SUBJECT: TIGING		ited Liability Company	
The enclosed Articles of	f Organization and fee(s) are	e submitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
Linda S. I	Rigby		
		Name of Person	
Harbor In	n of Venice, LLC	<u> </u>	
		Firm/Company	
321 S. Ha	arbor Drive		
		Address	
Venice, Flo	rida 34285		
		ty/State and Zip Code	
harborinnof	/enice@comcast.ne	for future annual report notification)	
For firsthan information		•	
ror turiner information of	concerning this matter, pleas	e call:	
Linda S. Rigby		at (941) 488-6565	
Name o	of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check for	r 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 Ci	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compa	any is:	
Harbor Inn of Venice, LLC		
(Must end with the words "Limite	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
321 Harbor Drive	321 Harbor Drive	
Venice, Florida	Venice, Florida	
34285	34285	
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)		
The name and the Florida street address o	f the registered agent are:	
Linda S. Rigby		1 AUG -8
	Name	
321 Harbor D	rive	and the same
Florida str	reet address (P.O. Box NOT acceptable)	

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..

City, State, and Zip

34285

Registered Agent's Signature (REQUIRED)

Venice

(CONTINUED)

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

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

	
Use attachment if necessary)	

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.)

Linda S. Rigby

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)