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(Requestor's Name)			
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(City/State/Zip/Phone #)			
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(Business Entity Name)			
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COVER LETTER

Division of Corporations			
SUBJECT:	70 Pâlms, LLC		
<u></u>	Name of Limited L	ability Company	
The enclosed Artic	les of Organization and fee(s) are subn	nitted for filing.	
Please return all co	rrespondence concerning this matter to	the following:	
	Stephen D. Le	ntz, Esquire	
	Nan	ne of Person	
	Stephen D. Le	ntz & Associates, PLC	
	Fira	n/Company	
	2610 Potters	Road, Suite 108	
		Address	
	Virginia Beac	h, Virginia 23452	
	City/Sta	te and Zip Code	
	brettmargaron		
	E-mail address: (to be used for fu	ture annual report notification)	
For further informa	tion concerning this matter, please call	:	
Brett Ma:	rgaron	239) 472-8888	
N	ame of Person	Area Code & Daytime Telephone Number	
Enclosed is a chec	ck for the following amount:	,	
\$125.00 Filing Fee	Certificate of Status	\$155.00 Filing Fee & \$\ \text{Certified Copy} \text{Certified Copy (additional copy is enclosed)} \text{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:				
70 Palms, L	LC			
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liabilit	y Comp	any i	s:
Principal Office Address:	Mailing Address:			
5105 Sanibel Captiva Road Sanibel, Florida 33957	same		•	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)				
The name and the Florida street address of the re	gistered agent are:	IAE AE	12	•
Brett Margar	Brett Margaron		چ	
Name		¥	22	TI
5105 Sanibel	Captiva Road	SSE	.7	
Florida street addre	Florida street address (P.O. Box NOT acceptable)		7	ED
Sanibel FL 33957 City, State, and Zip				
			ř.	
Having been named as registered agent and to acliability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete pergaccept the obligations of my position as regist Registered Agent's Signature.	is certificate, I hereby accept the app I further agree to comply with the p formance of my duties, and I am fam eved poent as provided for in Chapte	pointmen provision iliar wit	nt as ns of a h ana	all

(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:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Membe	er
MGRM	Brett Margaron
<u> </u>	5105 Sanibel Captiva Road
	Sanibel, Florida 33957
•	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other to	han 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.)	A
DECEMBER OF ONLY WITH	
REQUIRED SIGNATURE:	√
	MOSSING SEE SE
Signature of a	n member or an anthorized representative of a member.
(In accordance with sec	member or an anthorized representative of a member. ction 608.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true.
I am aware that any fal	se information submitted in a document to the Department of State?
constitutes a third degr	ree felony as provided for in s.817.155, F.S.)
and the section of th	Brett Margaron Typed or printed name of signee