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SECRETARY OF STATE
TALLAHASSEE FLOORS

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Premier Sandals Realty SWFL, 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:	
Michael F. Kayusa	<u></u>
Name of Person	
Michael F. Kayusa, Attorney at Law	
Firm/Company	
2400 First Street, Suite 303	
Address	2012
Fort Myers, FL 33901	FEB
City/State and Zip Code	25 TO
Joni @ Dremier Sandals Teaty. Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	CORIO
April McDaniel at (239) 334-8200	, B
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \times \text{\$130.00 Filing Fee & Certificate of Status} \text{\$155.00 Filing Fee & S160.00 Filing Fee & Certificate of Copy (additional copy is enclosed)} \text{\$Certified Copy (additional copy is enclosed)} \$Certif	f Status & py
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:

PREMIER SANDALS REALTY SWFL, 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:	
15880 San Carlos Boulevard Unit 240	15880 San Carlos Boulevard Unit 240	<u> </u>
Fort Myers, FL 33908	Fort Myers, FL 33908	
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address on Michael F. Kayusa	n Registered Agent. You must designate an indiv	s Signature: B
Florida str	reet address (P.O. Box NOT acceptable)	
Fort Myers	_{FL} 33901	
	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)

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 Member		
MGRM	Joni M. Willoughby	
	15880 San Carlos Boulevard, Unit 240	
	Fort Myers, FL 33908	
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(Use attachment if necessary)		
ICLE V: Effective date, if other than t	he date of filing: (OPTIONA	L)
effective date is listed, the date must	be specific and cannot be more than five business day	s pri
90 days after the date of filing.)		
,		
<b>REQUIRED SIGNATURE:</b>		
01/1	11	

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.)

1 0 1 1/0.1.0

Typed or printed name of signe

### 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)