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EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: Clearwater Cay Holdings	s, LLC
	Liability Company
The enclosed Articles of Organization and fee(s) are sub-	bmitted for filing.
Please return all correspondence concerning this matter	to the following:
Brian A. Crumbaker, Esq.	
	ame of Person
Hopping Green & Sams, P.	A
F	irm/Company
119 South Monroe Street, St	uite 300
	Address
Tallahassee, Florida 32301	
	State and Zip Code
BrianC@hgslaw.com	
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please concerning this matter are proposed to the proposed this matter are proposed to the proposed this matter are proposed to the proposed to the proposed this matter are proposed to the p	all:
Brian Crumbaker	at (850) 222-7500
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	\$155.00 Filing Fee & \$160.00 Filing Res. Certified Copy Certificate of Status & F
\$125.00 Filing Fee \$\times 130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee Certified Copy (additional copy is enclosed) 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

ART	TOL	Æ I	- 1	٧n	me

The name of the Limited Liability Company is:

Clearwater Cay Holdings, 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:

c/o U.S. Bank National Association, as Trustee Two James Center, 1021 East Cary Street, 18th Floor Richmond, Virginia 23219

c/o U.S. Bank National Association, as Trustee Two James Center, 1021 East Cary Street, 18th Floor

Richmond, Virginia 23219

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:

NRAI Services, Inc.

Name

515 East Park Avenue

Florida street address (P.O. Box NOT acceptable)

Tallahassee

FL 32301 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 performancy 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..

stered 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:

(Use attachment if necessary) RTICLE V: Effective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be more than five business days prior 90 days after the date of filing.) REQUIRED SIGNATURE: REQUIRED SIGNATURE: (In accordance with section 608.408(3), Florida Statutes, the execution of this document to the Department of 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 to the Department of Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member. Signature of a member or an authorized representative of a member.		= Manager 1" = Managing Member	Name and Address:
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			Free free contracts

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)