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2012 JUL 30 PM 2: 35
SECRETARY OF STATE

J. BRYAN
JUL 3 1 2012
EXAMINER

COVER LETTER

TC		Section Corporations		
SI	_{BJECT:} Pacit	ic Pools of Lee Co	ounty, LLC	
50			ed Liability Company	
Th	e enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Ple	ease return all corre	spondence concerning this matt	er to the following:	
	Michael	F. Kayusa, Esqu	ire	
			Name of Person	
•	Michael	F. Kayusa, Attorn	ey at Law	MIR JUL 30 PH 2: SECRETARY OF STRUCTURE FLOW
			Firm/Company	SEE SEE
	P.O. Box	x 2237		OL 30 P
			Address	EF P
	Fort Myer	s, FL 33902		7. ST. 2:
		Cit	y/State and Zip Code	(E) 15 S
		E-mail address: (to be used f	or future annual report notification)	The second secon
For	r further informatio	n concerning this matter, please	e call:	
Αį	pril McDaniel		at (239) 334-8200	
_	Nam	e of Person	Area Code & Daytime Teleph	none Number
En	closed is a check	for the following amount:		
▼ \$12.	5.00 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 Cit Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RTI	CI	r	1	N.	m
А	KII		. н.		IV 9	me

The name of the Limited Liability Company is:

Pacific Pools of Lee County, 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:
930 SE 8th Terrace	930 SE 8th Terrace
Cape Coral, FL 33990	Cape Coral, FL 33990

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:

Michael F. Ka	yusa, Esquire
	Name
2400 First	Street, Suite 303
Flor	rida street address (P.O. Box NOT acceptable)
Fort Myers	_{FL} 33901
	City State and Zin

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:

	930 SE 8th Terrace Cape Coral, FL 33990
MGRM	Alan Stevens 930 SE 8th Terrace
	Cape Coral, FL 33990
Use attachment if necessary)	
LE V: Effective date, if other than t	the date of filing: (OPTIONA
ective date is listed, the date must days after the date of filing.)	t be specific and cannot be more than five business day
· U	

(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.)

Michael F. Kayusa 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)