

L12000110702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

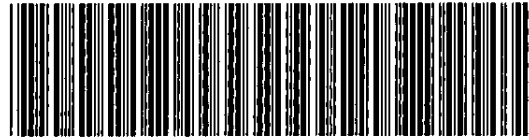
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 27 PM 4:12

August 23, 20012

Norma Van Vleet – Matthews
7380 S. Ocean Drive (719A)
Jensen Beach, FL 34957

Registration Section
Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314

ARTICLES OF ORGANIZATION

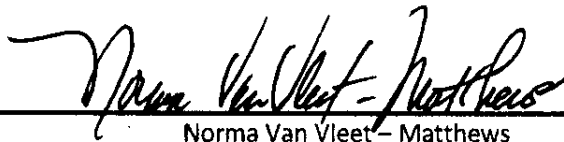
CASTLEBROOK HIDEAWAY, L.L.C.

THIS L.L.C. COVERS BUSINESS RENTAL OF PROPERTY AT:
5901 CASTLEBROOK DRIVE, RALEIGH, N.C. 27604

SAID PROPERTY IS OWNED BY CARROLL H. MATTHEWS, WHO AGREES TO LEASE THE PROPERTY
TO THIS L. L. C.

TERMS AND PRICE TO BE ESTABLISHED PRIOR TO 1 NOVEMBER 20012.

SIGNED:
Registered Agent"



Norma Van Vleet – Matthews

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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
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TO: **Registration Section**
Division of Corporations

SUBJECT: CASTLEBROOK HOMEAWAY, L.L.C.
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:

NORMA VAN VLEET-MATTHEWS

Name of Person

CASTLEBROOK HOMEAWAY, L.L.C.

Firm/Company

7380 S OCEAN DR (719A)

Address

JENSEN BEACH, FL 34957

City/State and Zip Code

NORMAVANVI@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NORMA VAN VLEET-MATTHEWS

Name of Person

at (772) 618-0105

Area Code & Daytime Telephone Number

Enclosed is a check for 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 Circle
Tallahassee, FL 32301

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DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CASTLEBROOK HOMEAWAY, L.L.C.

(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:

7380 S. OCEAN DR (719A)
JENSEN BEACH, FL
34957

Mailing Address:

← SAME

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:

NORMA VAN Vleet-MATTHEWS
Name

7380 S. OCEAN DR (719A)
Florida street address (P.O. Box **NOT** acceptable)
JENSEN BEACH FL 34957
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.

Norma H. Van Vleet-Matthews
Registered Agent's Signature (REQUIRED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM


Name and Address:

CARROLL H. MATTHEWS
7380 S. OCEAN DR (719A)
JENSEN BEACH, FL 34957

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: (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.)

REQUIRED SIGNATURE:



Carroll H. Matthews
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.)

CARROLL H. MATTHEWS
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)