## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000246172 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

https://efile.cuphiz.org/comme/efilepur.eve

Account Name : HENDERSON, FRANKLIN, STARNES & HOLT, P.

Account Number: 075410002172 : (239)344-1100

: (239)344-1200 Fax Number

\*\*Enter the email address for this business entity to be used for future: annual report mailings. Enter only one email address please.\*\*

	- an	-
ESTAIL	Address:	^
		_
	·	_

### FLORIDA LIMITED LIABILITY CO. LPMR REAL ESTATE INVESTMENT COMPANY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

10/10/2012

UCT 1 1 2012

FILED

12 OCT 10 AM 8: 05

SLORETARY OF STATE TALLAHASSEE, FLORIDA

FAX AUDIT NO .: H12000246172 3

# ARTICLES OF ORGANIZATION OF LPMR REAL ESTATE INVESTMENT COMPANY, LLC

#### **ARTICLE I-NAME**

The name of the limited liability company shall be LPMR REAL ESTATE INVESTMENT COMPANY, LLC (the "Company").

#### ARTICLE II-MAILING AND STREET ADDRESS

The street address of the principal office of the Company is:

17021 Upriver Drive North Fort Myers, Florida 33917

The mailing address of the principal office of the Company is:

P.O. Box 3481 North Fort Myers, Florida 33918-3481

#### ARTICLE III-EFFECTIVE DATE

This limited liability company's existence shall commence upon the filling of these Articles and shall terminate as provided for in the Operating Agreement.

#### ARTICLE IV-INITIAL REGISTERED AGENT AND OFFICE

The name and street address of the initial registered agent of the Company are:

Name

<u>Address</u>

LYNDA E. PHELPS

17021 Upriver Drive North Fort Myers, Florida 33917

#### **ARTICLE V-PURPOSE**

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

#### ARTICLE VI-MANAGEMENT OF THE COMPANY

The Company shall be managed by not less than one (1) manager (the "Manager") and is, therefore, a manager-managed company. The following are the

FAX AUDIT NO .: H12000246172 3

10/10/2012 9:48:28 AM PAGE 3/004 Fax Server

FAX AUDIT NO.: H12000246172 3

names and addresses of the initial Managers who shall serve as the Managers of the Company until their successors are elected and qualified:

Name Address

LYNDA E. PHELPS 17021 Upriver Drive

North Fort Myers, Florida 33917

MICHELLE ROUSSEAU do 5475 Golden Gate Parkway, Suite 5

Naples, Florida 34116

#### ARTICLE VII-OPERATING AGREEMENT

The Members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

LYNDA E. PHELPS

**Authorized Representative** 

FAX AUDIT NO.: H12000246172 3

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: LPMR REAL ESTATE INVESTMENT COMPANY, LLC.
- 2. The name and address of the registered agent and office are:

Lynda E. Phelps 17021 Upriver Drive North Fort Myers, Florida 33917

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.

LYNDA E. PHELPS Registered Agent

OCT IO AM 8 05

FAX AUDIT NO.: H12000246172 3