

Division of Corporations

L13000008933

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.

(((H13000012488 3)))



H130000124883ABC.

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:
Account Name : STETLER & SKRIVAN, PL
Account Number : I20090000052
Phone : (239) 597-4500
Fax Number : (239) 687-2150

RECEIVED
13 JAN 16 PM 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

FILED
2013 JAN 16 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
Oak Ridge Hills, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

JAN 17 2013

D. BRUCE

(((H13000012488 3)))

**ARTICLES OF ORGANIZATION
OF
OAK RIDGE HILLS, LLC**

The undersigned acting as organizer of OAK RIDGE HILLS, LLC, under the Florida Limited Liability Company Act, adopts the following Articles of Organization for said limited liability company.

**ARTICLE I
NAME**

The name of the limited liability company shall be OAK RIDGE HILLS, LLC, (the "Company").

**ARTICLE II
DURATION**

The Company shall exist perpetually, unless dissolved according to law or as set forth in the Company's Operating Agreement.

**ARTICLE III
PURPOSE**

The Company is organized pursuant to the Florida Limited Liability Company Act for the purpose of conducting any lawful activity within or without the State of Florida, with the powers described in the Florida Limited Liability Company Act and as set forth in the Company's Operating Agreement.

**ARTICLE IV
BUSINESS ADDRESS/MAILING ADDRESS**

The address of the place of business in this State of the Company shall be 12980 Positano Circle, Unit #107, Naples, Florida 34105. The mailing address of the Company shall be 12980 Positano Circle, Unit #107, Naples, Florida 34105.

Prepared by:
Kent A. Skrivan, Esq.
Stetler & Skrivan, PL
1421 Pine Ridge Road, Suite 120
Naples, Florida 34109
(239) 597-4500
Bar #0893552

FILED
2013 JAN 10 03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(((H13000012488 3)))

(((H13000012488 3)))

ARTICLE V
REGISTERED AGENT

The name and address of the Company's initial registered agent and registered office is Kent A. Skrivan, Stetler & Skrivan, PL, 1421 Pine Ridge Road, Suite 120, Naples, Florida 34109.

ARTICLE VI
ADMISSION OF ADDITIONAL MEMBERS

Additional members may be admitted to the Company upon the consent of and approval of the members as more specifically set forth in the Company's Operating Agreement, and then only upon the condition that a new member be bound by and become a party to any Operating Agreement adopted by the Company.

ARTICLE VII
DISSOLUTION, CONTINUATION

The members shall have the right to continue the Company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or occurrence of any other event which terminates the membership of a member in the Company as may be more specifically set forth in the Company's Operating Agreement.

ARTICLE VIII
MANAGEMENT

The Company is to be managed by a Manager. The name and address of the initial Manager of the Company is:

Kurt Wurstle
12980 Positano Circle, Unit #107
Naples, Florida 34105

FILED
2013 JAN 16 AM 10:03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(((H13000012488 3)))

(((H13000012488 3)))

ARTICLE IX
ADDITIONAL PROVISIONS

The effective date of this limited liability company shall be upon filing.

IN WITNESS WHEREOF, the undersigned has caused these Articles of Organization to be executed this 16 day of January, 2013.

By: 

Kent A. Skrivan, authorized agent for Organizer

In accordance with Section 608.408, Florida Statutes the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.

FILED
2013 JAN 16 AM 10:03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(((H13000012488 3)))

(((H13000012488 3)))

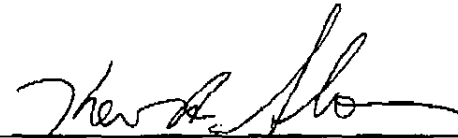
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/RESISTERED OFFICE**

In compliance with Section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered agent/registered office, in the State of Florida:

1. The name of the Limited Liability Company is OAK RIDGE HILLS, LLC
2. The name and address of the registered agent and registered office is:

Kent A. Skrivan
Stetler & Skrivan, PL
1421 Pine Ridge Road, Suite 120
Naples, Florida 34109

By:


Kent A. Skrivan, authorized agent for
Organizer

ACCEPTANCE:

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 relative to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registered agent.


Kent A. Skrivan

(((H13000012488 3)))