

L13000022148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

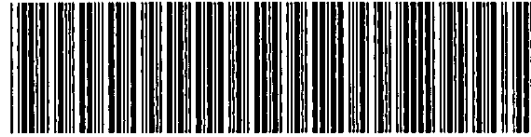
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800244201038

02/11/13--01042--001 \*\*155.00

FILED  
13 FEB 11 PM 1:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 12 2013

B. KOHR

(850) 245-6051

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: STFEN 1 LLC  
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:

G. Edward Clement

Name of Person

Potter Clement Lowry

Firm/Company

308 East 5th Avenue

Address

Mount Dora, FL 32757

City/State and Zip Code

eclement@pcld-law.com

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

For further information concerning this matter, please call:

G. Edward Clement

Name of Person

at ( 352 ) 383-4186

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

FILED  
13 FEB 11 PM 1:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION  
OF  
STFEN I LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization:

ARTICLE I - NAME

The name of the limited liability company shall be STFEN I LLC ("Company")

ARTICLE II - ADDRESS

The mailing address of the principal office of the Company is 1348 Valley Pine Circle, Apopka, FL 32712. The street address of the Company is 1348 Valley Pine Circle, Apopka, FL 32712.

ARTICLE III - DURATION

The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The Company's existence shall be perpetual unless the Company is dissolved earlier as provided in these Articles of Organization or in the Operating Agreement.

ARTICLE IV – REGISTERED AGENT AND OFFICE

The name of Company's initial registered agent in Florida is G. Edward Clement. The address of Company's registered office in Florida is 308 East Fifth Avenue, Mount Dora, Florida 32757.

ARTICLE V – ADMISSION OF NEW MEMBERS

Except as set forth in the Operating Agreement, no additional members shall be admitted to the Company except with the unanimous written consent of all the members of the Company and on such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the Company as set forth in the Operating Agreement of the Company.

ARTICLE VI – MEMBERS' RIGHT TO CONTINUE BUSINESS

The remaining member(s) of the Company have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company. The business may be continued only on the unanimous written consent of the remaining member(s).

**FILED**  
13 FEB 11 PM 1:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE VII – MANAGEMENT

The Company shall be managed by one or more managers in accordance with Operating Agreement adopted by the members for the management of the business and affairs of the Company. The Operating Agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The manager or managers may not adopt emergency regulations. The name and address of the initial manager of the Company is:

NAME	MAILING ADDRESS	STREET ADDRESS
Kamil F. Gowni	1348 Valley Pine Circle Apopka, FL 32712	1348 Valley Pine Circle Apopka, FL 32712

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these Articles of Organization at Mount Dora, Florida, on this 7<sup>th</sup> day of February, 2013.

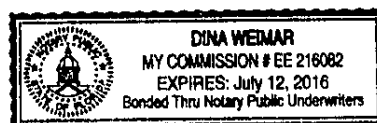
  
KAMIL F. GOWNI

STATE OF FLORIDA  
COUNTY OF SEMINOLE

Sworn to and subscribed before me this 7<sup>th</sup> day of February, 2013, by Kamil F. Gowni,

- ( X ) who is personally known to me and did take an oath.  
( ) who has produced a Florida driver's license as identification and did take an oath.

  
NOTARY PUBLIC  
STATE OF FLORIDA



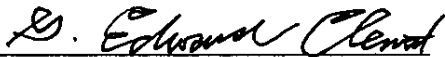
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN  
THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: STFEN 1 LLC
2. The name and the Florida street address of the registered agent and office are:

G. Edward Clement  
308 East Fifth Avenue  
Mount Dora, Florida 32757

**ACCEPTANCE BY REGISTERED AGENT:**

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, Fla. Stat.



G. Edward Clement  
Registered Agent