

213000095174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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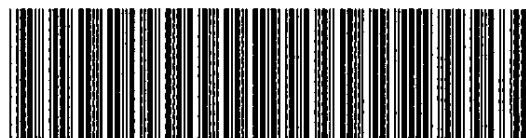
(Business Entity Name)

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TALLAHASSEE, FLORIDA

J. Shivers JUL 03 2013

(850) 245-6051.

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: **SCALISE FAMILY HOLDING COMPANY FIVE, 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:

**Timothy J. Conner, Esq.**

Name of Person

**Conner Bosch Law, P.A.**

Firm/Company

**4488 N. Oceanshore Blvd.**

Address

**Palm Coast, FL 32137**

City/State and Zip Code

**tjconner@cblpa.com**

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

For further information concerning this matter, please call:

**Timothy J. Conner, Esq.** at ( **386** ) **445-9322**  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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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**ARTICLES OF ORGANIZATION**  
**OF**  
**SCALISE FAMILY HOLDING COMPANY FOUR, LLC**

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

**ARTICLE I – NAME**

The name of the limited liability company shall be **SCALISE FAMILY HOLDING COMPANY FOUR, LLC** ("company").

**ARTICLE II – ADDRESS**

The mailing address and the street address of the principal office of the company is 240 London Drive, Palm Coast, Florida 32137.

**ARTICLE III – DURATION**

The company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State or on another effective date as specified. 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 OFFICE AND AGENT**

The name and street address of the registered agent of the company in the state of Florida are:

Timothy J. Conner  
4488 N. Oceanshore Blvd.  
Palm Coast, FL 32137

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## **ARTICLE V – MEMBERS**

The names and addresses of the Members are as follows:

Gaspare Scalise  
240 London Drive  
Palm Coast, FL 32137

Alba Scalise  
240 London Drive  
Palm Coast, FL 32137

## **ARTICLE VI – ADDITIONAL CAPITAL CONTRIBUTIONS**

Members may make additional capital contributions to the company on the consent of the Managing Members, or as provided in the Operating Agreement.

## **ARTICLE VII – TRANSFER DURING LIFE**

No member shall sell, assign, pledge or otherwise transfer, pledge or encumber, in any manner or by any means whatever, any interest in all or part of his capital contribution in the company (hereinafter referred to as transfer) except upon approval of the Managing Members.

## **ARTICLE VIII – ADMISSION OF NEW MEMBERS**

No additional members shall be admitted to the company except with the written consent of the Managing Members of the company and on such terms and conditions as shall be determined by the Managing Members. A member may not transfer his or her interest in the company except as set forth in the Operating Agreement of the company, and no transferee shall have the right to participate in the management of the business and affairs of the company or become a member unless the Managing Members of the company other than the member proposing to dispose of his or her interest approve of the proposed transfer by written consent.

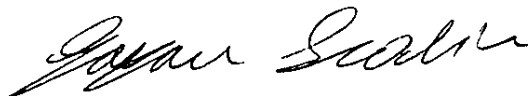
### ARTICLE IX – MEMBERS' RIGHT TO CONTINUE BUSINESS

The company shall not be dissolved on the death, bankruptcy, or dissolution of a member, or on the occurrence of any other event that terminates the continued membership of a member in the company, unless the business of the company is terminated by majority vote of all the remaining members.

### ARTICLE X – MANAGEMENT

The company shall be managed by the Members in accordance with regulations adopted by the members and as set out in the Operating Agreement for the management of the business and affairs of the company. These regulations may contain any provisions for the management of the affairs of the company not inconsistent with law or these Articles of Organization.

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these Articles of Organization at Palm Coast, Florida, on this 23<sup>rd</sup> day of May, 2013.



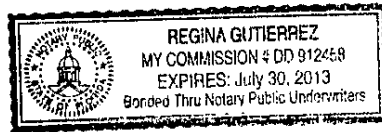
\_\_\_\_\_  
Gaspare Scalise

STATE OF FLORIDA  
COUNTY OF FLAGLER

23<sup>rd</sup> THE FOREGOING instrument was acknowledged before me this  
day of May, 2013 by Gaspare Scalise, who is personally

known to me or has produced Fla. Drivers' License as identification and who did (did not) take an oath.

Regina Gutierrez  
NOTARY PUBLIC



ACCEPTANCE BY REGISTERED AGENT

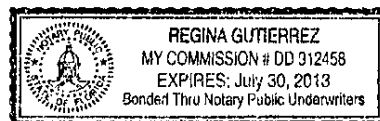
Having been designated as Registered Agent to accept service of process for the above-stated limited liability company, at the registered office above, I hereby accept said designation, agree to act in this capacity, and agree to comply with the provisions of Section 48.091, Florida Statutes relative to keeping open said office.

Timothy J. Conner  
Timothy J. Conner  
Registered Agent

STATE OF FLORIDA  
COUNTY OF FLAGLER

The foregoing instrument was acknowledged before me this 23<sup>rd</sup> day of May, 2013, by Timothy J. Conner, who is personally known to me and who has produced \_\_\_\_\_ as identification and who did/did not take an oath.

Regina Gutierrez  
NOTARY PUBLIC  
My Commission Expires:



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