

L13000116263

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850) 385-6735
Fax Number : (954) 641-4192

Effective Date 08/09/13

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
CLEAR CAY, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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13 AUG 16 PM 12:18
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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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AUG 19 2013

J. BRYAN

H/3000182561

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CLEAR CAY, LLC

(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:

83 Cache Cay

Vero Beach, FL 32983

Mailing Address:

P.O. Box 473

Sewell, NJ 32983

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.)

Effective Date 08/09/13

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

Fillings, Inc.

Name

3732 Northwest 16th Street

Florida street address (P.O. Box NOT acceptable)

Fort Lauderdale

FL

33311

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..

Teressa Roman

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

Name and Address:

MGRM

WILLIAM ROUNDTREE III
1 CLEARBROOK LANE
SEWELL, NJ 08080

MGRM

RON P. LARRICK
63 CACHE CAY
VERO BEACH, FL 32963

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: August 9, 2013 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

William Roundtree, III

Typed or printed name of signer.

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)

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