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.

(((H140000309323)))

H1400000003032348C*

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

To:	• •	•			
10;	Division of Con	rnorations			
	Fax Number				₹. 2
					2014 Ser
From:					- }
	Account Name		CORPORATE	FILING SE	RVICE, INCL
	Account Number				- S. S. J.
		: (305)55	1		
	Fax Number	: (305)22	0-1440		
					25. <u>0</u>
or the em	ail address for	this busin	ness entitu	to be use	
er the em	eport mailings.	Enter only	one email	address t	lease ** o
William I					_
Email Ade	iress:				
·					
•	FLORIDA L	VA CHIMBIAN I	I V A BATT FOR	7.00	
	1/4 () 1/2 1 1 3 A A	I PA/I I 1 I 1 I 1 I 1 I 1 I 1 I 1 I 1 I 1 I	1 1 A K 1 1 1 '	Y 1 1 1 1.	
∢	L LOKIDA L	TEXALE T TAXA 1		L CO.	

Certificate of Status	1		
Certified Copy	0		
Page Count	03		
Estimated Charge	\$130.00		

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
AQUA POOL CAFE & COUNTRY CLUB. LLC	
(Must end with the words "Limited Liability Company, the abbreviation "L.L.C" or the designation "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
7601 E. AREASURY DRIVE 7601 E. AREASURY DRIVE. NORTH BAY VILLAGE. FL. 33141 ROX # 3	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate un individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	
The name and the Florida street address of the registered agent are: MANIA A. ALVANEZ AREA AR	Ţ
Name SS	
Florida street address (P.O. Box NOT acceptable)	
North Bay Viftage 33141	3 p . 140
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 605 F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H14000030\$32

H1400003833

<u>Title:</u> "MGR" = Manager "MGRM" = Managing	g Member	Name and Add	ress:		
HERM.	,	MARIA.	A. Alva		
		1601 5 T NORTH BI	REASURI	DRIE TE 3	3/41
			<u> </u>		
	.j				
				• •	
(Use attachment if ne	cessary)			,	
OT E M. Effective date	, if other than th	ne date of filing:		OPTIO	NAL)
LLE V; Eliecuve gate,		be specific and cann	ot be more tha	n five business	lays prio
effective date is listed,					
effective date is listed,	71 IIIg.y			•	
effective date is listed,					201
effective date is listed, 00 days after the date o		i a a	loue	TAN LAHA	2014 FEB
effective date is listed, 00 days after the date o REQUIRED SIGNA Sig	ATURE: Maugnature of a mem	De C Onber or an authorized re	X	كيب قبقية	2014 FEB - 7
effective date is listed, 90 days after the date o REQUIRED SIGNA Sig (In	ATURE: Mau mature of a men accordance with this document co	nber or an authorized respectively. section 605 0203 Florenstitutes an affirmation used herein are true.)	ida Statutes, the ex	cecution To	2014 FEB -7 AM 10: 56

Page 2 of 2

H14000030932