

L14000042005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☒ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

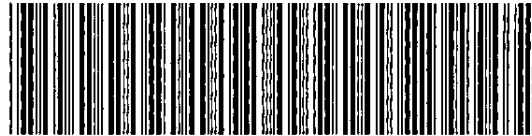
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

MAR 13 2018

A. LUNT

Office Use Only



900256939709

FILED
RECEIVED
DEPARTMENT OF STATE
2014 MAR 12 AM 3:36
TALLAHASSEE, FLORIDA
MAR 12 AM 4:23



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 050197 81879A

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : March 12, 2014

ORDER TIME : 3:14 PM

ORDER NO. : 050197-005

CUSTOMER NO: 81879A

2014 MAR 12 AM 3:19
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

DOMESTIC FILING

NAME: SCALISE UMBRELLA HOLDING
COMPANY, LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX _____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION
OF
SCALISE UMBRELLA HOLDING COMPANY, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 605, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I – NAME

The name of the limited liability company shall be SCALISE UMBRELLA HOLDING COMPANY, 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 is:

TIMOTHY J. CONNER
4488 N. Oceanshore Blvd.
Palm Coast, FL 32137

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 MAR 12 AM 3:09

FILED

ARTICLE V – MANAGERS

The names and addresses of each person authorized to manage or control the limited liability company:

GASPARE SCALISE, MANAGER	ALBA SCALISE, MANAGER
240 London Drive	240 London Drive
Palm Coast, FL 32137	Palm Coast, FL 32137

ARTICLE VI – 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 her capital contribution in the company (hereinafter referred to as transfer) except upon approval of the Managers.

ARTICLE VII – ADMISSION OF NEW MEMBERS

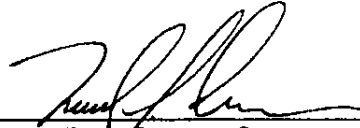
No additional members shall be admitted to the company except on such terms and conditions as shall be determined by the Managers. A member may not transfer his or her interest in the company except as set forth in the Operating Agreement of the company, and no transferee shall have the right to participate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

ARTICLE VIII – 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.

FILED
2014 MAR 12 PM 3:09
CLERK OF STATE
TALLAHASSEE, FLORIDA

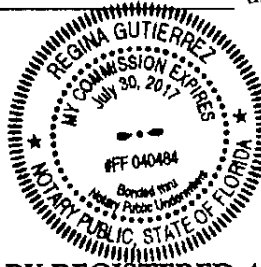
IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these Articles of Organization at Palm Coast, Florida, on this 10th day of March, 2014.


Timothy J. Conner, Organizer

STATE OF FLORIDA
COUNTY OF FLAGLER

THE FOREGOING instrument was acknowledged before me this 10th day of March, 2014 by Timothy J. Conner, who is personally known to me or has produced _____ as identification and who did (did not) take an oath.


NOTARY PUBLIC

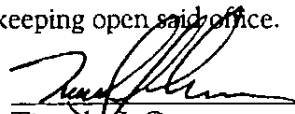


2014 MAR 12 AM 9:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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
Registered Agent

STATE OF FLORIDA
COUNTY OF FLAGLER

The foregoing instrument was acknowledged before me this 10th day of March, 2014, by Timothy J. Conner, who is personally known to me and who has produced _____ as identification and who did/did not take an oath.


NOTARY PUBLIC
My Commission Expires:

