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(Re	equestor's Name)	
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(Do	ocument Number)	
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FALL

APR 01 2014 S. YOUNG

, COVER LETTER

Division of Corporations	
SUBJECT: FOUY Corners C	ontractors, LLC 33 =
Name of Lim	ited Liability Company
The enclosed Articles of Organization and fee(s) are	·71(⁻¹)
Please return all correspondence concerning this ma	tter to the following:
Claudin	Name of Person
Regal 1	Palms Club, LLC Firm/Company
2700 Sand 1	Vine Rd. Address
Davenport Fl Ci Claudine Pr E-mail address: (to be used	ty/State and Zip Code 2 Gal Palm schib. com for future annual report notification)
For further information concerning this matter, please	se call:
Richard Wilkes at (Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	·
\$125.00 Filing Fee \$\times \text{Certificate of Status}\$	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Address
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
	tractore 110	
Four Corners Conf	Liability Company, "L.L.C.," or "LLC.	")
ARTICLE II - Address: The mailing address and street address of the principal o	ffice of the Limited Liability Company i	s:
Principal Office Address:	Mailing Address:	
boio Old Tampa Hwy Davenport, FL 33896	2700 Sand Mine Davenport, FL 3:	Rd. 3897
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration	Registered Agent. You must designate a	an individual or
The name and the Florida street address of the registered	agent are:	
Michelle M Name 2700 Sand	11/15	•
Name		
2700 Sand	Mine Kd.	
Florida street address (P.O. Box		
Davenport	_{FL} 3-3897	
City	Zip	
Having been named as registered agent and to accept se the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ob Chap Registered Agent's Signa	of the appointment as registered agent and of all statutes relating to the proper and of all statutes relating to the proper and of all statutes of my position as registered agenter 605, F.S	d agree to act in this complete performance
(CONTINU	JED)	IN F
. Page 1 of 2	2	FILED WAR 26 AT CRETZERS SELECTION

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Richard Wilkes
	2700 Sand Mine Rd
	Davenport, FL 33897
AMBR	Russel Christner
	2700 Sand Mine Rd
0	Daverport, FL 3389/
MGR	Philip Shoebridge
MGR	2700 Sand Mine Kd.
AMBR	21 / -
MNIBK	Kobert Treanor
	Davenon + Fi 33897

(Use attachment if necessary)	
EV. Effective date if other than the	date of filing: (OPTIONAL)
	e specific and cannot be more than five business days prior to or 90
f filing.)	e specific and cannot be more than five business days prior to or 90
f filing.)	e specific and cannot be more than five business days prior to or 90
f filing.) E VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90
of filing.) E VI: Other provisions, if any.	And Cannot be more than five business days prior to or 90
Filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a	member or an authorized representative of a member.
REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation to	member or an authorized representative of a member. In 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true.
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