

L14000055465

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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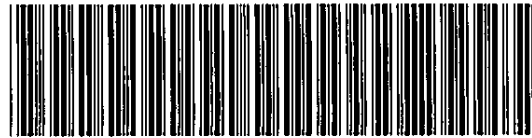
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/04/14--01001--005 **160.00

TO ADOPTIVE
SUFFICIENCY OF FILING

2014 APR -3 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 APR -3 PM 4:30

FILED

1 APR 14

CORP DIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-23

CONTACT: SAVANNAH DEBOER

DATE: 04/03/14

REF. #: 7747668.9103674

CORP. NAME: CASTLE LAKE, LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 70017699 **FOR \$** 160.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input checked="" type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

ARTICLES OF ORGANIZATION
OF

CASTLE LAKE, LLC
a Florida limited liability company

1. The name of the limited liability company is:

CASTLE LAKE, LLC.

2. The mailing and street address of the principal office of the limited liability company is:

3574 South Moorings Way
Coconut Grove, FL 33133.

3. The name and street address of the initial registered agent of the limited liability company are:

NRAI Services, Inc.
1200 S. Pine Island Road
Plantation, FL 33324.

Dated: as of April 2nd, 2014.

FILED
14 APR - 3 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Colin Veitch
Authorized Representative

**ACCEPTANCE OF APPOINTMENT
AS REGISTERED AGENT**

The undersigned, who has been designated in the foregoing Articles of Organization as registered agent for the limited liability company therein named, hereby agrees that (i) it accepts such appointment as registered agent and will accept service of process for and on behalf of said limited liability company, and (ii) it is familiar with and will comply with any and all laws relating to the complete and proper performance of the duties and obligations of a registered agent of a Florida limited liability company.

Dated: as of April 3, 2014.

NRAI Services, Inc.
Registered Agent

Katie Wonsch

By: Katie Wonsch, Assistant Secretary

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TALLAHASSEE, FLORIDA