

# L14000103742

Page 1 of 6  
Division of Corporations

2014 06 27 12:59:10 EDT

14076608 01 From: Michelle Alvarson  
Page 1 of 1

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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.

(((H14000153743 3)))



H140001537433ABC

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

To:

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

From:

Account Name : GREENBERG, TRAURIG (ORLANDO)  
Account Number : 103731001374  
Phone : (407) 418-2435  
Fax Number : (407) 420-5909

\*\*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.  
Sconset Capital, LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

FILED  
2014 JUN 27 AM 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
14 JUN 27 PM 2:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

850-617-6381

6/27/2014 10:50:21 AM PAGE 1/001 Fax Server



June 27, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

GREENBERG TRAURIG (ORLANDO)

SUBJECT: SCONSET CAPITAL, LLC  
REF: W14000040126

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly  
Regulatory Specialist II

FAX Aud. #: H14000153743  
Letter Number: 114A00014023

RECEIVED

14 JUN 27 PM 2:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:** The name of the Limited Liability Company is:

**SCONSET CAPITAL, LLC**

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

2281 Lee Road, Suite 204  
Winter Park, Florida 32789

**ARTICLE III - Managers:**

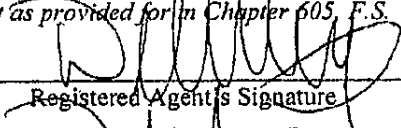
The initial manager of the Company is:  
Dell Avery

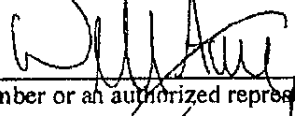
**ARTICLE IV - Registered Agent, Registered Office and Registered Agent's Signature:**

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

**Name:** Dell Avery  
**Address:** 2281 Lee Road, Suite 204  
Winter Park, Florida 32789

*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

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member

(In accordance with section 605.0203 (1)(b), 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 section 817.155, Florida Statutes.)

Dell Avery

Typed or printed name of signor

FILED  
2014 JUN 27 AM 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA