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Division of Corporations Electronic Filing Cover Sheet

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To:

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: LYONS & LYONS, P.A.

Account Number : 120030000061

Phone

: (239)948-1823

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Email Address: jgardner@lyons-law.com

FLORIDA LIMITED LIABILITY CO.

True North of Bonita Springs, LLC

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ARTICLES OF ORGANIZATION

OF

TRUE NORTH OF BONITA SPRINGS, LLC

The undersigned, under the provisions of Chapter 605 of the Florida Statutes (the "Act"), for the purpose of forming a limited liability company under the laws of the State of Florida, do set forth the following:

1. Name.

The name of the limited liability company is True North of Bonita Springs, LLC, (hereinafter referred to as the "Company").

2. Address.

Principal Office Address:

Mailing Address

23870 Tuscany Way Bonita Springs, FL 34134

23870 Tuscany Way Bonita Springs, FL 34134

3. Registered Agent.

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

L&L Para, Ltd. Co. 27911 Crown Lake Blvd. Suite 209 Bonita Springs, FL 34135

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.

L&L Para, Ltd. Co., a

Florida limited liability company

Jason D. Gardner, Manager

Its: Manager

ARTICLES OF ORGANIZATION
OF
TRUE NORTH OF BONITA SPRINGS, LLC

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4. Management.

The overall management and control of the business and affairs of the Company shall be vested in one or more managers and the initial managers shall be:

Title: Name and Address:

MGR Gregory W. Bell 23843 Tuscany Court, Bonita Springs, FL 34134

MGR James G. Massie 23843 Tuscany Court, Bonita Springs, FL 34134

IN WITNESS WHEREOF, I, Jason D. Gardner, have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this the <u>h</u> day of October, 2014.

Jason D. Gardner

The Authorized Representative of a Member

STATE OF FLORIDA COUNTY OF LEE

The foregoing instrument was acknowledged before me on the <u>Ile</u> day of October, 2014, by Jason D. Gardner, as the Authorized Representative of a Member, who (7) is personally known to

me or () produced ______ as identification.



CARDI C. GRAHAM
MY COMMISSION #FF108800
EXPIRES April 1, 2018
FloridanotaryService.com

4B36-9270-4799, v. 1

ARTICLES OF ORGANIZATION
OF
TRUE NORTH OF BONITA SPRINGS, LLC