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Florida Department of State
Division of Corporations
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To:

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

From:

M. Ives
Account Name : CIKLIN LUBITZ MARTENS & O'CONNELL
Account Number : 076376001447
Phone : (561) 832-5900
Fax Number : (561) 833-4209

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA LIMITED LIABILITY CO.
VERDES EXCHANGE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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14 NOV -4 AM 10:00
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14 NOV -4 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/03/2014 17:01

(FAX)

P.002/005

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11/3/2014 11:22:28 AM PAGE 1/001 Fax Server



November 3, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

CIKLIN LUBITZ MARTENS & O'CONNELL

SUBJECT: VERDES EXCHANGE, LLC
REF: W14000064362

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.

Teresa Brown
Regulatory Specialist II

FAX Aud. #: H14000247486
Letter Number: 314A00023427

RECEIVED
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P.O. BOX 6327 - Tallahassee, Florida 32314

11/03/2014 17:01

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P.003/005

850-817-8381

10/23/2014 7:55:44 AM PAGE 1/001 Fax Server



October 23, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations
CIKLIN LUBITZ MARTENS & O'CONNELL

SUBJECT: VERDES LLC
REF: W14000064362

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile 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.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is F04000005123.

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.

Teresa Brown
Regulatory Specialist II

FAX Aud. #: H14000247486
Letter Number: 614A00022696

P.O BOX 6327 - Tallahassee, Florida 32314

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**ARTICLES OF ORGANIZATION
OF
VERDES EXCHANGE, L LC**

FILED
14 NOV -4 PM 3:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, desiring to form a limited liability company under the Florida Limited Liability Company Act, Chapter 605.101, et seq., Florida Statutes (the "Act"), does sign, acknowledge and deliver in duplicate to the Secretary, Florida Department of State, these Articles of Organization.

ARTICLE I

Name

The name of the Limited Liability Company (the "Company") is **VERDES EXCHANGE, LLC.**

ARTICLE II

Address

The mailing address and the street address of the principal office of the Company is

Principal Office Address: 13757 Coconut Drive, Juno Beach, Fl. 33408.

Mailing Address: 13757 Coconut Drive, Juno Beach, Fl. 33408.

ARTICLE III

Registered Agent, Registered Office and Registered Agent's Signature

The name and the Florida street address of the Registered Agent are:

Jared C. Thomas, 13757 Coconut Drive, Juno Beach, Fl. 33408.

Having been named as registered agent and to accept service of process for the 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

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Jared C. Thomas

ARTICLE VI

Management

The name and address of each person authorized to manage and control the Company:

Title:	Name and Address:
Manager	Jared C. Thomas 13757 Coconut Drive Juno Beach, Fl. 33408

IN WITNESS WHEREOF, the parties have entered into, executed and made these Articles of Organization as of this 3rd day of November, 2014.

(In accordance with section 605.0205(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



Signature of Manager

Jared C. Thomas
Typed or printed name of signee

Manager
Typed or printed title

e