

Florida Department of State  
Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.  
6130 ISLAND DRIVE, LLC**

Certificate of Status	0
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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME OF LIMITED LIABILITY COMPANY

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

6130 ISLAND DRIVE, LLC

ARTICLE II - ADDRESS OF LIMITED LIABILITY COMPANY

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THE  
LIMITED LIABILITY COMPANY IS:

8743 OSTROM WAY  
WEEKI WACHEE, FLORIDA 34613

ARTICLE III - REGISTERED AGENT AND OFFICE

THE NAME OF THE REGISTERED AGENT AND THE STREET ADDRESS OF  
THE REGISTERED OFFICE OF THE LIMITED LIABILITY COMPANY IS:

THOMAS B. HARPER  
8743 OSTROM WAY  
WEEKI WACHEE, FLORIDA 34613

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, FLORIDA STATUTES.

DATED: 11-3-14

x THB  
THOMAS B. HARPER

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**ARTICLE IV - MANAGEMENT**

THE NAME AND ADDRESS OF EACH MANAGER OR MANAGING MEMBER IS AS FOLLOWS:

MANAGER/MEMBER: THOMAS B. HARPER  
8743 OSTROM WAY  
WEEKI WACHEE, FLORIDA 34613

YVONNE D. HARPER  
8743 OSTROM WAY  
WEEKI WACHEE, FLORIDA 34613

DATED: 11.3.14 x [Signature]  
THOMAS B. HARPER

IN ACCORDANCE WITH SECTION 605.0203(1)(b), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.

11/04/2014 AM 8:16  
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DIVISION OF CORPORATIONS