

L14000188743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

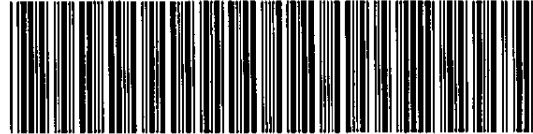
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15 JAN 20 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 JAN 20 2015

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Purgatory Holdings, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patty Soriano

Name of Person

Purgatory Holdings, LLC

Firm/Company

8435 SW 80th St., Suite 1

Address

Ocala, FL 34481

City/State and Zip Code

patty_soriano@otowfl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patty Soriano

at (352) 387-7505

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**AMENDED AND RESTATED ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

The name of the Limited Liability Company is:

Purgatory Holdings, LLC

ARTICLE II – Address:

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

Principal Office Address:

8435 SW 80th St., Suite 2
Ocala, FL 34481

Mailing Address:

8435 SW 80th St., Suite 2
Ocala, FL 34478

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration).

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

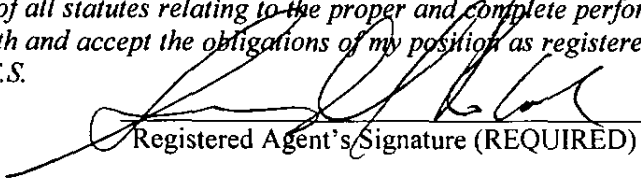
Gerald Richard Colen
Name

7243 Bryan Dairy Road
Florida street address (P.O. Box is NOT acceptable)

Largo FL 33777-1538
City, State, and Zip

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TALLAHASSEE, FLORIDA

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 (REQUIRED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

On Top of The World Communities, Inc., a Florida
corporation
8447 SW 99th Street
Ocala, FL 34481

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE V: Effective Date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing).

ARTICLE VI: Other Provisions, if any.

REQUIRED 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 s.817.155, F.S.)

Kenneth D. Colen as Authorized Representative of a Member

Typed or printed name of signee