

L14000191423

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.

(((H14000290404 3)))



H140002904043ABCY

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 : SHUTTS & BOWEN LLP (ORLANDO)
Account Number : I200300000004
Phone : (407) 835-6959
Fax Number : (407) 843-4076

FILED
14 DEC 16 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address:

corpmail@shutts.com

FLORIDA LIMITED LIABILITY CO.
CFKP SAND LAKE, LLC

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

RECEIVED
14 DEC 16 AM 10:00
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

7 Dec 17 2014

Electronic Filing Menu

Corporate Filing Menu

Help

(((H14000290404 3)))

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name**

The name of the Limited Liability Company is:

CFKP SAND LAKE, LLC

ARTICLE II - Mailing Address

The mailing address of the principal office of the Limited Liability Company is as follows:

260 South Osceola Avenue, #608
Orlando, Florida 32801**ARTICLE III - Street Address**

The street address of the principal office of the Limited Liability Company is as follows:

7075 Kingspointe Parkway, Unit 16-B
Orlando, Florida 32819**ARTICLE IV - Management**

The Company shall be managed by one or more managers, and is thus a manager-managed limited liability company. The initial manager shall be Alexander M. Fink.

**ARTICLE V - Registered Agent and Office and
Registered Agent's Signature**

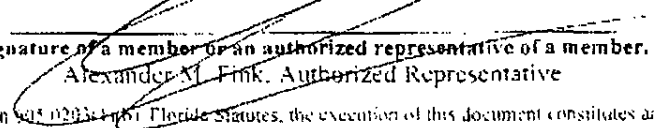
The name and the Florida street address of the registered agent are:

Rachel Libersat
260 South Osceola Avenue, #608
Orlando, Florida 32801

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.


Registered Agent's Signature

Rachel Libersat


Signature of a member or an authorized representative of a member.

Alexander M. Fink, Authorized Representative

In accordance with section 605.02(3)(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 § 817.155, Florida Statutes.)

(((H14000290404 3)))