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2014 DEC 30 PH 12: 28
SECRETARY OF STATE

JAN 1 3 2015 **T. HAMPTON**

COVER LETTER

TÕ:	Registration Division of C			
SUBJI	ECT: Scott D	Cotherman, LLC Name of Lin	nited Liability Company	
		of Organization and fee(s) a	_	
	Kenneth F	. Lorch	Name of Person	
	<u>Hamilton</u>	Thies & Lorch LLP	Firm/Company	
	200 S Wa	cker Dr., Suite 3800	Address	
	Chicago, I		City/State and Zip Code	
	rch@htl-law.co	E-mail address: (to be use a concerning this matter, plea	d for future annual report notifica	ation)
Kenne	th F Lorch Nam	at (312) 650-8640 Area Code Daytime Te	lephone Number
Enclos	ed is a check for	the following amount:		
⊠ \$125.0	0 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ing Address stration Section	Street/Courier Add Registration Section	r <u>ess</u>

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

71111	AND OF COMMERCIAL CO.	······································		COMMITTEE
ARTICLE I - Name:	r tablica de la la la			
The name of the Limited	Liability Company is:			i
Soott D. Cothomica . I. I. C	•			
Scott D Cotherman, LLC	st end with the words "Limite	d Liability Co	mpany, "L.L.C"	or "LLC.")
(0				
ARTICLE II - Address: The mailing address and	street address of the principal	office of the L	imited Liability (Company is:
Principal Office Addres	<u>s:</u>	Mailing	Address:	
16350 Gulf Shores Drive Boca Grande, FL 33921			1, 16350 Gulf Sh ande, FL 33921	
nother business entity w		ion.) ed agent are: Cotherman		<u>-</u>
	Nan	ne		
	16350 Gulf Sh	ores Drive #2	0	
Ī	Florida street address (P.O. Bo			•
	Boca Grande	FL	33921	
	City		Zip	
the place designated i capacity. I further agre	n this certificate, I hereby acce to comply with the provision familiar with and accept the o	ept the appoint s of all statutes obligations of n opter 905, F.S	ment as registered relating to the pr ny position as regi	stated limited liability company at I agent and agree to act in this oper and complete performance istered agent as provided for in
	(CONTIN	UED)		7A S

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SECRETARY OF STATE

7011, DEC 30 . PM 12: 28

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Scott Cotherman
	POB 1071, 16350 Gulf Shores Drive #20
	Boca Grande, FL 33921
	Book Grande, I E 33721
	
	· · · · · · · · · · · · · · · · · · ·
(
ective date is listed, the date must be sp	e of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 9
E V: Effective date, if other than the date ective date is listed, the date must be sp of filing.)	ecific and cannot be more than five business days prior to or 9
E V: Effective date, if other than the date ective date is listed, the date must be sp of filing.) E VI: Other provisions, if any.	ecific and cannot be more than five business days prior to or 9
E V: Effective date, if other than the date fective date is listed, the date must be sp of filing.) E VI: Other provisions, if any.	ecific and cannot be more than five business days prior to or 9
EV: Effective date, if other than the date ctive date is listed, the date must be sp filing.) EVI: Other provisions, if any. EXEQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor	ember or an authorized representative of a member. 25.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. The mation submitted in a document to the Department of State
EV: Effective date, if other than the date ctive date is listed, the date must be sp filing.) EVI: Other provisions, if any. EEQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under 1 am aware that any false infor constitutes a third degree felor	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true.

ARTICLE IV-

Page 2 of 2

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)

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