Division of Corporations

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.

(((H15000097094 3)))



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:

Robin Padgett

Account Number : 072720000036

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Phone

: (407)843-4600

Fax Number : (407)843-4444

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

del.potter@lowndes-law.com Email Address:

φ

FLORIDA LIMITED LIABILITY CO.

S. Summerlin Ave, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 08 2015 J. HARRIS

April 22, 2015

FLORIDA DEPARTMENT OF STATE

LOWNDES DROSCICK DOSTER KANTOR & REED, P.A.

SUBJECT: S. SUMMERLIN AVE, LLC

REF: W15000028030

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.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H15000097094 Letter Number: 715A00008054

Jenna: Attached are revised Articles. If the revised Articles are satisfactory, please file same giving us the initial filing date. Thank you.

Robin

ά

P.O BOX 6327 - Tallahassee, Florida 32314

H15000097094

ARTICLES OF ORGANIZATION OF S. SUMMERLIN AVE, LLC

ARTICLE I - NAME

The name of this limited liability company is S. SUMMERLIN AVE, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 100 S. Tremain St., #J1, Mount Dora, FL 32757.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 100 S. Tremain St., #J1, Mount Dora, FL 32757, and the name of the initial registered agent of the Company at that address is Muriel L. Kelly.

ARTICLE IV - MANAGEMENT

The Company is member-managed for purposes of Section 605.0407, Florida Statutes, and other relevant provisions of Chapter 605, Florida Statutes, and the current member of the Company is Muriel L. Kelly.

Muriel L. Kelly, Authorized Representative

ACCEPTANCE OF REGISTERED AGENT

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.

Muriel L. Kelly

3911296/166194/1877421/1

H15000097094