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From:

Account Name : LYONS & LYONS, P.A.
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Phone : (239) 948-1823
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA LIMITED LIABILITY CO.
Southern Cross of Florida, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLES OF ORGANIZATION
OF****SOUTHERN CROSS OF FLORIDA, LLC**

The undersigned, under the provisions of Chapter 605 of the Florida Statutes (the "Act"), for the purpose of forming a limited liability company under the laws of the State of Florida, do set forth the following:

1. Name.

The name of the limited liability company is **SOUTHERN CROSS OF FLORIDA, LLC** (hereinafter referred to as the "Company").

2. Address.**Principal Office Address:**

175 1ST Avenue South
Naples, FL 34102

Mailing Address

175 1ST Avenue South
Naples, FL 34102

3. Registered Agent.

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

L&L PARA, LTD. CO.
27911 Crown Lake Boulevard, Suite 209
Bonita Springs, FL 34135

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..

L&L PARA, LTD. CO., a
Florida limited liability company

By: 
Richard D. Lyons
Its: Manager

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4. Management.

The overall management and control of the business and affairs of the Company shall be vested in a **manager** and the initial manager shall be:

<u>Title:</u>	<u>Name and Address:</u>
MGR	John H. Rothert 175 1ST Avenue South Naples, FL 34102

IN WITNESS WHEREOF, I, Richard D. Lyons, have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 8th day of June, 2015.


Richard D. Lyons
The Authorized Representative of a Member

STATE OF FLORIDA
COUNTY OF LEE

The foregoing instrument was acknowledged before me on the 8th day of June, 2015, by Richard D. Lyons, as the Authorized Representative of a Member, who ☒ is personally known to me or () produced _____ as identification.


Notary Public

(Seal)

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