

L15000102363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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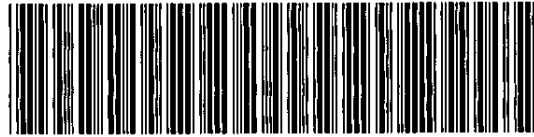
(Business Entity Name)

(Document Number)

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RECEIVED  
DEPARTMENT OF STATE  
15 JUN 12 PM 2:21

FILED  
15 JUN 12 AM 9:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 667206 81514A

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE : June 12, 2015

ORDER TIME : 1:10 PM

ORDER NO. : 667206-005

CUSTOMER NO: 81514A

DOMESTIC FILING

NAME: PARK HILL PROPERTIES LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The Name of the Limited Liability Company is: PARK HILL PROPERTIES LLC

**ARTICLE II – Address:**

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

- a: Mailing Address: 3175 Highlands By The Lake Way, Lakeland, Florida 33812  
b: Street Address: 3175 Highlands By The Lake Way, Lakeland, Florida 33812

**ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:**

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

Monika Bara  
Name  
  
3175 Highlands By The Lake Way  
Florida street address (Post Office Box **NOT** acceptable)  
  
Lakeland, Florida 33812  
City, State and Zip

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15 JUN 12 AM 9:01  
CLERK OF DISTRICT COURT  
TALAHASSEE, 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

**ARTICLE IV – Management (Check applicable box)**

- ☐ The Limited Liability Company is to be managed by one manager or managers and is, therefore, a manager – managed company.
- ☒ The Limited Liability Company is to be managed by one member or members and is, therefore, member - managed company.

**ARTICLE V –**

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:**

AMBR

Monika Patricia Bara  
3175 Highlands By The Lake Way  
Lakeland, Florida 33812

AMBR

Fernando Ignacio Loret DeMola  
3175 Highlands By The Lake Way  
Lakeland, Florida 33812

**ARTICLE VI:** 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.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



\_\_\_\_\_  
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.)

\_\_\_\_\_  
Monika Patricia Bara

Typed or printed name of signee