

Division of Corporations

Page 01/2

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.

(((H15000201784 3)))



H150002017843ABC

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) 617-6381

From:

Andrew Dunstan
Account Name : FOLEY & LARDNER OF TAMPA
Account Number : 071344001620
Phone : (813) 229-2300
Fax Number : (813) 221-4210

15 AUG 20 PM 3:30
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Highland City Holding Company, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

AUG 2 12015

S. GILBERT

H15000201784 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the limited liability company is: **Highland City Holding Company, LLC**

ARTICLE II – Address of Principal Office:

The street address of the principal office of the limited liability company is: 100 N. Tampa Street, Suite 2700, Tampa, Florida 33602

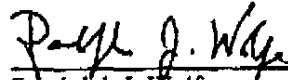
ARTICLE III – Mailing Address of Limited Liability Company:

The mailing address of the limited liability company is: 100 N. Tampa Street, Suite 2700, Tampa, Florida 33602

ARTICLE IV – Registered Agent, Registered Office & Registered Agent's Signature:

The mailing address and street address of the registered office of the Corporation are: One Independent Drive, Suite 1300, Jacksonville, Florida 32202. The name of the registered agent of the Corporation is F & L Corp.

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.


Randolph J. Wolfe

X


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.)

Stephen J. Szabo

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)