

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.

(((H15000205893 3)))



H150002058933ABC0

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:

Account Name : SUPERBIZ.COM, INC.

Account Number : I20070300160 Phone : (800)494-3124 Fax Number : (305)675-2811

~				_								e	e
≭£n	rer_the	email	address	for	this	busin	ess	entity	τo	рe	usea	ror	ruture
	annua	report	. mailir	gs.	Enter	only	one	email	add	res	s ple	ase.	**
	→ ¹	-		-		_							

Email Address:

FLORIDA LIMITED LIABILITY CO. Lawson Rock HOA LLC

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

CHETARY OF STAIF

H15000205893 3

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:

LAWSON ROCK HOA LLC

ARTICLE II ADDRESS

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

17719 SUGAR PINE WAY

MONTVERDE, FLORIDA 34756

ARTICLE III PURPOSE

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV REGISTERED AGENT

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

DAVID SELLON

17719 SUGAR PINE WAY

MONTVERDE, FLORIDA 34756

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. If 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 bobligations of my position as registered agent as provided for in Chapter 605, ES.

DAVID SELLON / Registered Agent's signature

9:5

H15000205893 3

PAGE 2 LAWSON ROCK HOA LLC

ARTICLE V

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER
DAVID SELLON
17719 SUGAR PINE WAY
MONTVERDE, FLORIDA 34756

AUTHORIZED MEMBER
DIANA SELLON
17719 SUGAR PINE WAY
MONTVERDE, FLORIDA 34756

15 AUG 26 AH 6: 55
SEGRETARY IN STATE
PALLAHASSEE FLORID

DAVID SELLON / Authorized Representative's signature

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)