

Division of Corporations

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Florida Department of State
Division of Corporations
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Email Address: charlesm@cpamassie.com

FLORIDA LIMITED LIABILITY CO.
Corkscrew Holdings SWFL, LLC

Certificate of Status	1
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October 15, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

HUBCO

SUBJECT: CORKSCREW HOLDINGS, LLC
REF: W15000068344

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

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Jessica A Fason
Regulatory Specialist II

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TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name Corkscrew Holdings SWFL, LLC

The name of the Limited Liability Company is:

ARTICLE II - Address

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

13579 San Georgio Drive
Estero, FL 33928

ARTICLE III - Registered Agent, Registered Office & Registered Agents Signature

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

Charles Abels Massie
Name

15671 San Carlos Blvd., Suite 201
(P.O. Box or Mail Drop Box NOT acceptable)

Fort Myers, FL 33908
(City/State/Zip)

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 - Charles Abels Massie

ARTICLE IV -

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

Aaron Leishman
13579 San Georgio Drive
Estero, FL 33928

AMBR

Melica Leishman
13579 San Georgio Drive
Estero, FL 33928

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ARTICLE V - Effective date, if other than the date of filing: October 14, 2015
(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.)

REQUIRED SIGNATURE:

 AMBR
Signature of a member or 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. 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.)

Melica Leishman
Typed or printed name of signer

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