

LIS-000211318

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.

((H15000302703 3)))



H150003027033ABCV

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 : ORNSTEIN-SCHULER CAPITAL PARTNERS, LLC
Account Number : I20150000079
Phone : (678)904-9956
Fax Number : (678)904-9402

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: cpatel@oscs.net

RECEIVED
15 DEC 23 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 DEC 23 AM 8:41

FLORIDA LIMITED LIABILITY CO.
Palmetto Waters LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

DEC 28 2015

T. SCOTT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Palmetto Waters LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew S. Kaynard

 Name of Person

 Firm/Company

5337 N. Socrum Loop Rd., #304

 Address

Lakeland, Florida 33809

 City/State and Zip Code

matk@oscp.net

 E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Reshma Patel 678 904-9956
 _____ at (_____) _____
 Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed)

Mailing Address
 New Filing Section
 Division of Corporations
 P.O. Box 6327
 Tallahassee, FL 32314

Street Address
 New Filing Section
 Division of Corporations
 Clifton Building
 2661 Executive Center Circle
 Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Palmetto Waters LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

5337 N. Socrum Loop Rd., #304
Lakeland, Florida 33809

5337 N. Socrum Loop Rd., #304
Lakeland, Florida 33809

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

NRAI Services, Inc.
Name

1200 South Pine Island Road
Florida street address (P.O. Box **NOT** acceptable)

Plantation Florida 33324
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.

J. Rahm
Registered Agent's Signature (REQUIRED)
Asst Sec to NRAI

(CONTINUED)

15 DEC 23 AM 8:47
DIVISION OF CORPORATE REGISTRATION
STATE OF FLORIDA

ARTICLE IV-

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

Title:
"AMBR" = Authorized Member
"MGR" = Manager
MGR

Name and Address:

GH Manager LLC
4355 Cobb Parkway, Suite J 555
Atlanta, Georgia 30339

(Use attachment if necessary)

ARTICLE V: 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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

Matthew S. Kaynard

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)