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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : MOMBACH, BOYLE & HARDIN, P.A.
Account Number : 074143000064
Phone : (954) 467-2200
Fax Number : (954) 467-2210

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

Email Address: cboyle@mbhlawyer.com

**FLORIDA LIMITED LIABILITY CO.
TIDEWATER APARTMENTS, LLC**

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
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YMD 2/10

16 FEB -9 PM 2:17
RECEIVED
16 FEB -9 AM 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF
TIDEWATER APARTMENTS, LLC

The undersigned, as the authorized representative of the initial members of **TIDEWATER APARTMENTS, LLC**, a Florida limited liability company formed hereunder (the "Company"), on behalf of the members of the Company, hereby forms a limited liability company under the laws of the State of Florida.

ARTICLE I
COMPANY NAME

The name of the Company is **TIDEWATER APARTMENTS, LLC**.

ARTICLE II
MANAGEMENT

The Company will be a manager managed company. The Managers are SKY3209 LLC, a Florida limited liability company and Tidewater Holdings, LLC, a Florida limited liability company.

ARTICLE III
MAILING ADDRESS AND STREET ADDRESS OF COMPANY

The mailing address, the street address and e-mail address of the principal office of the Company is:

c/o Mombach, Boyle, Hardin & Simmons, P.A.
100 NE Third Avenue, Suite 1000
Fort Lauderdale, Florida 33301
e-mail: cboyle@mbhlawyer.com

H16000033491 3

ARTICLE IV
REGISTERED AGENT AND REGISTERED AGENT ADDRESS

The registered agent and the street address of the registered agent of this Company in the
State of Florida shall be:

Conrad J. Boyle
Mombach, Boyle, Hardin & Simmons, P.A.
100 NE Third Avenue, Suite 1000
Fort Lauderdale, Florida 33301

IN WITNESS WHEREOF, the undersigned being the authorized representative of the initial
members of the limited liability company hereby executes these Articles of Organization, this 8
day of February, 2016.



CONRAD J. BOYLE

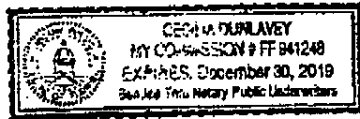
(In accordance with section 605.0203 (1) (b), Florida Statutes,
the execution of this document constitutes an affirmation
under the penalties of perjury that the facts stated herein are
true. I am aware that any false information submitted in a
document to the Department of State constitutes a third
degree felony as provided for in s.817.155, F.S.)

H16000033491 3

H16000033491 3

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 8 day of February, 2016, by
CONRAD J. BOYLE, who ☒ is personally known to me or who ☐ has produced a Florida
driver's license as identification.



Cecilia Dunlavy

Notary Public - State of Florida
My Commission Expires:
Commission Number:

16 FEB -9 PM 2:17
NOTARY PUBLIC
STATE OF FLORIDA

Having been named as registered agent and to accept service of process for the above 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.

DATED this 8 day of February, 2016.

[Signature]

CONRAD J. BOYLE

H16000033491 3