

3/4/2016

2016 4:49AM

Division of Corporations

No. 1667 P. 1

L16000044627

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.

(((H16000056440 3)))



H160000564403ABC-

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 : DUNWODY WHITE & LANDON, P.A. / PALM BEACH
Account Number : I20020000176
Phone : (561)655-2120
Fax Number : (561)655-2168

FILED
16 MAR -4 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: astashis@dw1-law.com

**FLORIDA LIMITED LIABILITY CO.
INFINITY PROPERTY VENTURES LLC**

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

RECEIVED

16 MAR -4 PM 9:00

03-0716

Electronic Filing Menu

Corporate Filing Menu

Help

H16000056440 3

**ARTICLES OF ORGANIZATION
OF
INFINITY PROPERTY VENTURES LLC**

FIRST: The name of the Limited Liability Company is INFINITY PROPERTY VENTURES LLC.

SECOND: The mailing address and street address of the principal office of the Limited Liability Company is 4810 Whispering Pine Way, Naples, FL 34103.

THIRD: The name and street address of the Registered Agent are as follows:

Alfred J. Stashis, Jr.
4001 Tamiami Trail N., Ste. 200
Naples, FL 34103

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


Alfred J. Stashis, Jr.

FOURTH: The Limited Liability Company is to be managed by a Manager and the name and address of the Manager are as follows:

Mark E. Heinold
4810 Whispering Pine Way
Naples, FL 34103

FIFTH: Effective date, if other than the date of filing: 3/4/16
(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.)

In accordance with §605.0203(1)(b), F.S., the execution of this document constitutes an affirmation under 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 §817.155, F.S.


MARK E. HEINOLD, as a Member


JODI L. HEINOLD, as a Member

Date: March 4, 2016

H16000056440 3

FILED
16 MAR -4 PM 4:50
CLERK OF STATE
TALLAHASSEE, FLORIDA