L16000044819

(Requestor's Name)					
(Address)					
(Add	dress)				
(City	//State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



900282626259

02/29/16--01014--020 **125.00

16 FEB 29 PM 4: 50
SECRETARY OF STATE

63-07-18

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	PECT: SULLIVAN-Ch Nam	ARAC + ER ne of Limited Liability	Investment y Company	ts, LLC.		
The er	nclosed Articles of Organization and	fee(s) are submitted	for filing.			
Please	e return all correspondence concerni	ng this matter to the fo	ollowing:			
	Buil Amor	R	Person			
Name of Person						
		_				
		Cape Coral Tax &				
	Accounting Services, LLC. 3306 Del Prado Blvd. South					
	Cape Coral, FL 33904					
		City/State and	Zip Code			
	BILLANTARD	CAPE LAKE	s. com	,		
E-mail address: (to be used for future annual report notification)						
For fi	iurther information concerning this n	atter, please call:				
	Bull ANTAR Name of Person	at (<u></u>	N39 SYO- Area Code & Daytime Telep	7500 Phone Number		
Enclosed is a check for the following amount:						
⊠ \$125.0	00 Filing Fee \$130.00 Filin Certificate o	f Status Cert	i.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Addr Registration So Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7 L 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SULLIVAN-CHARACTER INVESTMENTS, LLC. 427 ELDORADO PKWY W. CAPE CORAL, FL 33914

ARTICLE II - Address:

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

SULLIVAN-CHARACTER INVESTMENTS, LLC. 336 BLUFFSIDE POINT CORDOVA, TN 38018

Principal Office Address:

427 ELDORADO PKWY W. CAPE CORAL, FL 33914

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

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

BILL ANTAR, CPA CAPE CORAL TAX & ACCOUNTING SERVICES, LLC 3306 DEL PRADO BLVD. S. CAPE CORAL, FL 33904

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 (REQUIRED)

(CONTINUED)
Page 1 of 2.

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

DEREK A CHARACTER (Managing Member) 336 BLUFFSIDE POINT CORDOVA, TN 38018

RUBY CHARACTER (Managing Member) 336 BLUFFSIDE POINT CORDOVA, TN 38018 16 FEB 29 PH 4: 50
SECRETARY OF STATE
TALL ANASSEE FLORIO

ARTICLE V: Effective date, if other than the date of filing:

This LLC shall have perpetual existence, commencing upon the date of filing of these articles with the Florida Department of State.

REQUIRED SIGNATURE:

Signature of a member or an 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.)

Typed or printed name of signee