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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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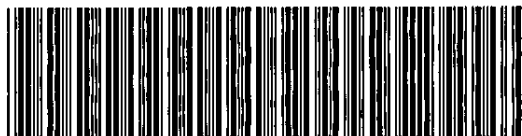
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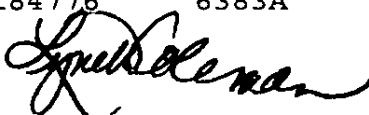
T SCHROEDER

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 184776 6383A

AUTHORIZATION :



COST LIMIT : \$ 125.00

ORDER DATE : June 17, 2016

ORDER TIME : 3:58 PM

ORDER NO. : 184776-005

CUSTOMER NO: 6383A

DOMESTIC FILING

NAME: 245 CREEKSIDE COVE, LLC

EFFECTIVE DATE:

\_\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX \_\_\_\_\_ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION FOR  
245 CREEKSIDE COVE, LLC,  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is 245 CREEKSIDE COVE, LLC.

**ARTICLE II - Address**

The mailing address of the principal office of the Limited Liability Company is 7165 Columbia Circle, Fort Myers, FL 33908, and the street address of the principal office of the Limited Liability Company is 7165 Columbia Circle, Fort Myers, FL 33908.

**ARTICLE III - Duration**

The period of duration for the Limited Liability Company shall be from the time the Articles of Organization are filed, until December 31, 2050, except as otherwise provided in Article VI.

**ARTICLE IV - Management**

The Limited Liability Company is to be managed by two (2) managers and the names and addresses of such managers who are to serve as managers until their successors are elected and qualified are:

Salvatore P. Maniscalco  
7165 Columbia Circle  
Fort Myers, FL 33908

Kelly A. Maniscalco  
7165 Columbia Circle  
Fort Myers, FL 33908

**ARTICLE V - Admission of Additional Members**

The members may admit additional members upon the unanimous vote of all members, and payment towards capital of the sum required by said vote.

**ARTICLE VI - Members Rights to Continue Business**

The remaining members of the Limited Liability Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, if the remaining members agree by vote.

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ARTICLE VII - Registered Agent

The name and street address of the initial registered agent is:

Salvatore P. Maniscalco  
7165 Columbia Circle  
Fort Myers, FL 33908

IN WITNESS WHEREOF, SALVATORE P. MANISCALCO and KELLY A. MANISCALCO, Co-Trustees of The Maniscalco Joint Trust U/A/D May 4, 2016, the sole member of the Limited Liability Company mentioned for the purpose of forming a Limited Liability Company under the laws of the State of Florida do make, subscribe, acknowledge and file the foregoing Articles of Organization, hereby certifying that the facts therein stated are true, and accordingly set our hands and seals at FORT MYERS, FLORIDA this 17<sup>th</sup> day of JUNE, 2016.

The Maniscalco Joint Trust U/A/D May 4, 2016,  
Member

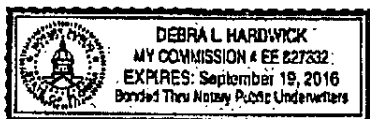
By: [Signature]  
Salvatore P. Maniscalco, Co-Trustee

By: [Signature]  
Kelly A. Maniscalco, Co-Trustee

STATE OF FLORIDA     )  
                                      )  
COUNTY OF LEE         )

BEFORE ME, the undersigned authority, personally appeared SALVATORE P. MANISCALCO and KELLY A. MANISCALCO, Co-Trustees of The Maniscalco Joint Trust U/A/D May 4, 2016, who are personally known to me and who did take an oath, depose and say that they executed the foregoing Articles of Organization, voluntarily, for the purposes therein expressed.

WITNESS my hand and official seal this 17<sup>th</sup> day of JUNE, 2016.



[Signature]  
Notary Public - State of Florida  
Commission No. EE 827332  
My Commission Expires: 9/19/16

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

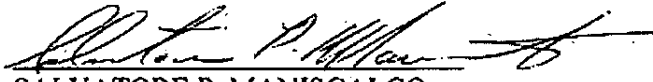
### ACCEPTANCE BY REGISTERED AGENT

In pursuance of Chapter 605.0113(2), Florida Statutes, the following is submitted, in compliance with said Act:

That 245 CREEKSIDE COVE, LLC, a Florida Limited Liability Company, desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the Articles of Organization, at Fort Myers, County of Lee, State of Florida, has named SALVATORE P. MANISCALCO, 7165 Columbia Circle, Fort Myers, County of Lee, State of Florida, as its agent to accept service of process within this State.

### ACCEPTANCE BY REGISTERED AGENT:

Having been named as Registered Agent to accept service of process for the above stated LLC, at the place designated in this certificate, I hereby accept to act in this capacity, acknowledge that I am familiar with the obligations of this position and agree to comply with the provisions of said Act relative to keeping open said office.

  
SALVATORE P. MANISCALCO,  
Registered Agent

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