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06/14/16 PM 12:39
CLERK OF COURT
JULIA A. HARRIS

06/21/16

June 13, 2016

VIA OVERNIGHT COURIER

Florida Department of State
New Filing Section
Division of Corporations
2661 Executive Center Circle
Clifton Building
Tallahassee, FL 32301

Re: *The Via Seville Fund, LLC*

Dear Sir or Madam:

Enclosed please find for filing a completed Articles of Organization for the above referenced domestic limited liability company. Also enclosed please find an additional copy of the Articles of Organization and a check made payable to the "Florida Department of State" in the amount of one hundred fifty-five dollars (\$155.00) to cover the appropriate fees for filing the Articles of Organization. This amount includes the filing fee for the Articles of Organization (\$125.00) and a request for a certified copy of the Articles of Organization (\$30.00).

I thank you in advance for your assistance with this matter. Please feel free to contact me should you have any questions or require anything further for this filing.

Sincerely,



Kathryn T. O'Neill
koneill@wbamct.com
(203) 862-2335

KTO:cgm
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: The Via Seville Fund, 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:

Kathryn O'Neill

Name of Person

Whitman Breed Abbott & Morgan LLC

Firm/Company

500 West Putnam Avenue, 2nd Floor

Address

Greenwich, CT 06830

City/State and Zip Code

koneill@wbamct.com

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

For further information concerning this matter, please call:

Kathryn O'Neill

203

862-2335

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:

The Via Seville Fund, 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:

2106 Wyatt Circle

Punta Gorda, FL 33950

Mailing Address:

2106 Wyatt Circle

Punta Gorda, FL 33950

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:

Richard Patterson

Name

2106 Wyatt Circle

Florida street address (P.O. Box **NOT** acceptable)

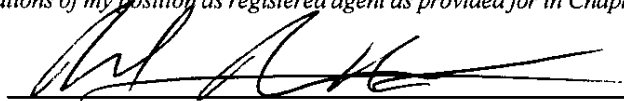
Punta Gorda, FL 33950

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK OF COURT
JAN 12 2009
PUNTA GORDA, FL

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Richard Patterson

179 Terrace Street

City Island, NY 10464

(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.

Richard Patterson

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)

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2020 JUN 10 PM 12:38
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JULY 10 2020
JULY 10 2020