

L16000170987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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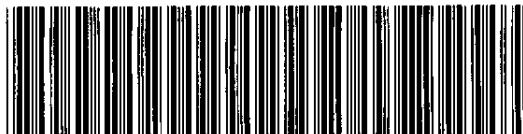
(Business Entity Name)

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9/13/14

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

ACCOUNT NO. : I20000000195

REFERENCE : 289003 4311639

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE : September 13, 2016

ORDER TIME : 12:25 PM

ORDER NO. : 289003-005

CUSTOMER NO: 4311639

DOMESTIC FILING

NAME: FLA HY MANAGER, LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS: _____

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**ARTICLES OF ORGANIZATION
OF
FLA HY MANAGER, LLC**

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ARTICLE I: - Name

The name of the Limited Liability Company is: **FLA HY MANAGER, LLC**

ARTICLE II: - Address

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

**4921 W. Bay Way Drive
Tampa, Florida 33629**

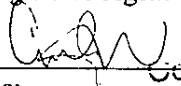
ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

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

**Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301**

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.

CORPORATION SERVICE COMPANY,
as Registered Agent


Name: John Williams
Title: Asst. Vice President

ARTICLE IV: - Management

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The name and address of each person authorized to manage and control the limited liability company is as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGR	Edwin Bulleit 4921 W. Bay Way Drive Tampa, Florida 33629

MGR	Kevin Mulshine 4921 W. Bay Way Drive Tampa, Florida 33629
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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on August 31, 2016.



Edwin Bulleit, Authorized Signer

(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 Section 817.155, Florida Statutes.)

Edwin Bulleit
Typed or printed name of signee

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