

Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP
Account Number : 075500004387
Phone : (813) 229-7600
Fax Number : (813) 229-1660

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

Email Address: arichards@slk-law.com

FLORIDA LIMITED LIABILITY CO.

Alex Nickie, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

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H17000019409 3

**ARTICLES OF ORGANIZATION
OF
ALEX NICKIE, LLC**

ARTICLE I – Name:

The name of the Limited Liability Company is **ALEX NICKIE, LLC**

ARTICLE II – Address:

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

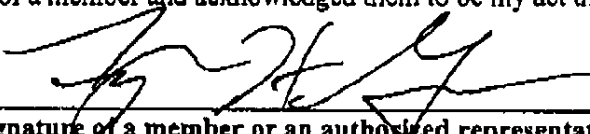
101 East Kennedy Boulevard
Suite 2800
Tampa, FL 33602

ARTICLE III – Management:

The Limited Liability Company is to be managed by a manager or managers. The initial manager shall be:

Jacqueline Niebles
101 East Kennedy Boulevard
Suite 2800
Tampa, FL 33602

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 20th day of January, 2017.



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 section 817.155, Florida Statutes)

Tyler H. Gordon

Authorized Representative
Typed or printed name of signee

H17000019409 3

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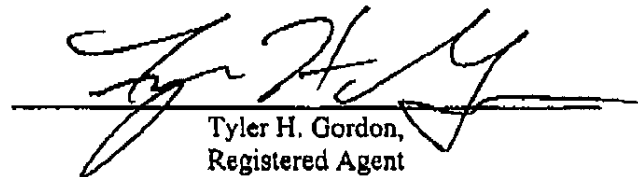
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is **ALEX NICKIE, LLC**
2. The name and the Florida street address of the registered agent are:

Tyler H. Gordon
101 East Kennedy Boulevard
Suite 2800
Tampa, FL 33602

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.



Tyler H. Gordon,
Registered Agent

H17000019409 3