

2/10/2017

Division of Corporations

Florida Department of State

Division of Corporations  
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Division of Corporations  
Fax Number : (850)617-6381From: **Carrie Ramos, FRP, Paralegal PLEASE FAX CONFIRMATION TO 407 244-5690**Account Name : GRAYROBINSON, P.A. - ORLANDO  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: paul@paulcaplan.co.ukFLORIDA LIMITED LIABILITY CO.  
Cypress Walk Estates, LLC

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Page Count	03
Estimated Charge	\$125.00

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FEB 13 2017

**ARTICLES OF ORGANIZATION**  
**FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**

**Name**

The name of this Limited Liability Company is:

Cypress Walk Estates, LLC

**ARTICLE II**

**Address**

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

1301 Parrilla de Avila  
Tampa, Florida 33613

**ARTICLE III**

**Management**

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

**ARTICLE IV**

**Initial Board of Managers**

This Limited Liability Company shall have one (1) manager initially. The number of managers may be either increased or decreased from time to time in accordance with the Operating Agreement of this Limited Liability Company, but shall never be fewer than one (1).

The name and address of the initial manager of this Limited Liability Company are as follows:

**Name**

Paul Caplan

**Street Address**

1301 Parrilla de Avila  
Tampa, Florida 33613

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# ARTICLE V

## Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

Paul Caplan  
1301 Patricia de Avila  
Tampa, Florida 33613

Having been named as registered agent in accept service of process for this limited liability company at the place so designated in these Articles of Organization, the undersigned hereby accepts this appointment and agrees to act in this capacity. The undersigned agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and is familiar with and accepts the obligations of the undersigned's position as registered agent, as provided for in Chapter 605, Florida Statutes.

  
REGISTERED AGENT'S SIGNATURE

In accordance with Section 605.020(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 in Section 912.13, Florida Statutes.

  
AUTHORIZED REPRESENTATIVE'S SIGNATURE

Paul Caplan, Authorized Representative  
Type or printed name of signer

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