# Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000177723 3)))



H170001777233ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: HOLLAND & KNIGHT

Account Number : 075350000340

: (407)425-8500

Phone Fax Number

: (407)244-5288

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

Email Address: TLC@ Paclanddeselopment.

# FLORIDA LIMITED LIABILITY CO.

TLC Centre Pointe Holdings, LLC

AECENEED
JUL -7 AM 1: 07
JUL -

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

#### ARTICLES OF ORGANIZATION FOR TLC CENTRE POINTE HOLDINGS, LLC (a Florida limited liability company)

The undersigned representative of a Member, desiring to form a limited liability company under and pursuant to the Florida Limited Liability Company Act, Chapter 605, Florida Statutes, does hereby adopt the following Articles of Organization:

#### ARTICLE I. NAME

The name of the limited liability company is: TLC Centre Pointe Holdings, LLC.

## ARTICLE II. ADDRESS

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

730 Bonnie Brac Street Winter Park, Florida 32789

## ARTICLE III. INITIAL REGISTERED AGENT AND OFFICE

The name and street address of the initial registered agent of the Company are:

Thomas L. Cavanaugh 730 Bonnie Brae Street Winter Park, Florida 32789

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.

Thomas L. Cavanaugh, Registered Agent

#### ARTICLE IV. MANAGEMENT

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

Title: Name and Address:

Mgr: Thomas L. Cavanaugh, 730 Bonnie Brae Street, Winter Park, FL 32789

#### ARTICLE VI. OPERATING AGREEMENT

The power to adopt, alter, amend, or repeal the Operating Agreement of the Company shall be vested in the Members of the Company.

(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 S.817.155, F.S.)

Dated: June \_\_\_, 2017

By: Thomas L. Cavanaugh

Title: Manager