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(R	equestor's Name)	
A)	ddress)	
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(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Nam	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		

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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724 850-508-1891 (cell)

Date: _	8/2/17 ACCT. 120160000072	w:()
Name:	Garden Bay 1250, LLC	
Document #:		
Order #:	10585200	
Certified Copy of Arts & Amend:		
Plain Copy: Certificate of Good Standing:		
Apostille/Notarial Certification:	Country of Destination: Number of Certs:	·
Filing:	Certified: Plain: COGS:	
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ \(\frac{55}{}\)	
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COVER LETTER

TO:	New Filing Section Division of Corporations			
SHRIE	GARDEN BAY 1250, LLC			
Name of Limited Liability Company				
The encl	osed Articles of Organization and fee(s)	are submitted t	for filing.	
Please re	turn all correspondence concerning this i	matter to the fo	llowing:	
	David C. Gair			
	,	Name of I	erson	
	Gray Reed & McGraw			
		Firm/Con		
	1601 Elm Street, Suite 4600			~.
		Addre	SS	
	Dallas, Texas 75201	•		
	dgair@grayreed.com	City/State and	Zip Code	 -
	E-mail address: (to be use	ed for future ar	nual report notification)	¥.
for further	information concerning this matter, plea	ise call:	·	
	David C. Gair	469	320-6046	
			Daytime Telephone Number	
Enclosed	is a check for the following amount:			
\$125.00	Filing Fee \$\ \tag{S130.00 Filing Fee & Certificate of Status}	Certific	Filing Fee & \$160.00 Filing Fee, d Copy Certificate of Status & Certified Copy (additional copy is enclosed)	ed)
	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 661 Executive Center Circle Fallahassee, Fl. 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

GARDEN BAY 12:				
(Must con	tain the words "Limited L	iability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	address of the principal of	fice of the Limited	Liability Company is:	
<u>Princip</u>	oal Office Address:		Mailing Address:	
1330 Collins Avenu	1330 Collins Avenue #1		35 Dallas Parkway	
Miami Beach, FL 33139			Addison, TX 75001	
ARTICLE III - Registered Ag The Limited Liability Compan	ent, Registered Office, & y cannot serve as its own F	Registered Agent.		
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	ent, Registered Office, & y cannot serve as its own F active Florida registration	Registered Ager Registered Agent, '	nt's Signature:	
ARTICLE III - Registered Ag	ent, Registered Office, & y cannot serve as its own F active Florida registration	Registered Ager Registered Agent. V	nt's Signature:	
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	ent, Registered Office, & y cannot serve as its own F active Florida registration	Registered Ager Registered Agent. V	nt's Signature: You must designate an individual o	
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	ent, Registered Office, & y cannot serve as its own F active Florida registration	Registered Agent. Segistered A	nt's Signature: You must designate an individual o	
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	ent, Registered Office, & y cannot serve as its own Factive Florida registration address of the registered a	Registered Ager Registered Agent. ' agent are: C T Corpor Name	nt's Signature: You must designate an individual of a signate an individual of a signature;	
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	ent, Registered Office, & y cannot serve as its own F active Florida registration address of the registered a	Registered Ager Registered Agent. ' agent are: C T Corpor Name	nt's Signature: You must designate an individual of a signate an individual of a signature;	

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)

further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	lawas A. Cayanayah, In
MGR	James A. Cavanaugh, Jr.
	16885 Dallas Parkway Addison, TX 75001
	Addison, TX 75001
	
	
(1)	
(Use attachment if necessary)	
e document's effective date on the Departme CTICLE VI: Other provisions, if any.	of meet the applicable statutory filing requirements, this date will not be listed a ent of State's records. Insact any and all lawful business for which limited liability companies
REQUIRED SIGNATURE	fovenavel
Signature of a	member or an authorized representative of a member.
This document is exe I am aware that any fi	ecuted in accordance with section 605.0203 (1) (b), Florida Statutes, also information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
	James A. Cavanaugh
	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 (Ont	· · · · · · · · · · · · · · · · · · ·
