

L17000264287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

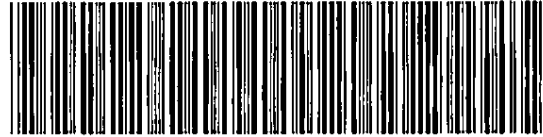
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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 984769 8025302

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 125.00

ORDER DATE : December 28, 2017

ORDER TIME : 11:58 AM

ORDER NO. : 984769-005

CUSTOMER NO: 8025302

DOMESTIC FILING

NAME: STUART RIVERSIDE, LLC

EFFECTIVE DATE:

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

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Roxanne Turner - EXT.

EXAMINER'S INITIALS: _____

[Handwritten notes and stamps on the right margin]

**ARTICLES OF ORGANIZATION
OF
STUART RIVERSIDE, LLC**

The undersigned hereby acknowledges these Articles of Organization for the purpose of forming a Limited Liability Company under the Florida Revised Limited Liability Company Act, Chapter 605, Laws of Florida.

**ARTICLE I
Name**

The name of the Limited Liability Company is "STUART RIVERSIDE, LLC".

**ARTICLE II
Address**

The mailing address and street address of the principal office of the Limited Liability Company is: 4741 Military Trail, Suite 200, Jupiter, Florida 33458.

**ARTICLE III
Registered Agent and Registered Office**

The name and the Florida street address of the Registered Agent are:

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, Florida 32301


FILED
JUN 20 11
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

ARTICLE IV
Commencement

The Limited Liability Company shall commence its existence upon filing with the Secretary of State of the State of Florida.

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.

Date: December 28, 2017



Kathy Scialpi,
Authorized Representative

**CERTIFICATE DESIGNATING PLACE OF
BUSINESS OR DOMICILE FOR THE SERVICE
OF PROCESS WITHIN THIS STATE, NAMING
AGENT UPON WHOM PROCESS MAY BE SERVED**

Pursuant to the provisions of Section 605.0113, Florida Statutes, this Limited Liability Company submits the following statement to designate a Registered Office and Registered Agent in the State of Florida:

That STUART RIVERSIDE, LLC desiring to organize under the laws of the State of Florida, has named CORPORATION SERVICE COMPANY, located at the Registered Office of the Limited Liability Company at 1201 Hays Street, Tallahassee, Florida 32301, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGMENT:

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

By: _____

Lydia Cohen
Asst. Vice President

03-20-2003
PM 1:11