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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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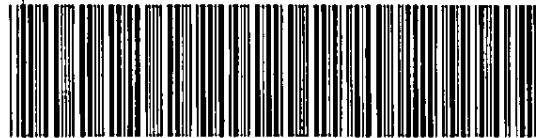
(Business Entity Name)

(Document Number)

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C RICO  
JAN 24 2018

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT: C & L ST. ARMANDS, LLC**

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ELIZABETH J. BARBER, ESQ.

Name of Person

DUNLAP & MORAN

Firm/Company

P.O. BOX 3948

Address

SARASOTA FLORIDA 34230

City/State and Zip Code

EBARBAR@DUNLAPMORAN.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELIZABETH J. BARBER

941

366-0115

at (

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$130.00 Filing Fee &  
Certificate of Status



\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)



\$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**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  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION

OF

### C & L ST. ARMANDS, LLC

The undersigned certifies that we have associated ourselves together for the purposes of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. We further declare that the following Articles shall serve as the Charter and authority for the conduct of business of the limited liability company.

#### ARTICLE I

##### NAME OF BUSINESS

The name of the limited liability company shall be **C & L ST. ARMANDS, LLC**.

#### ARTICLE II

##### PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

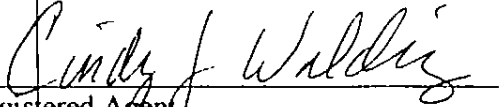
The street address of the principal office of the company is: 7464 Aguila Drive, Sarasota, Florida 34240 and mailing address of the company is: 7464 Aguila Drive, Sarasota, Florida 34240, in the County of Sarasota, State of Florida, but it shall have the power of authority to establish branch offices at any other place or places as the members may designate.

#### ARTICLE III

##### INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The name and address of the initial registered agent of the limited liability company is: Cindy J. Walding, 7464 Aguila Drive, Sarasota, Florida 34240, in the County of Sarasota, State of Florida.

*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.*

  
Registered Agent

Typed Name: Cindy J. Walding

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CLERK OF CIRCUIT COURT  
SARASOTA COUNTY, FLORIDA

ARTICLE IV  
MANAGEMENT

The name and address, including e-mail address, of each person authorized to manage and control the Limited Liability Company is:

**Title:**                      **Name and Address:**

MGR                      Cindy J. Walding  
7464 Aguila Drive  
Sarasota, Florida 34240

Email Address: momnadub@hotmail.com

ARTICLE V  
EFFECTIVE DATE

Effective date is the filing date of these Articles of Organization with the State of Florida.

ARTICLE VI  
OTHER PROVISIONS

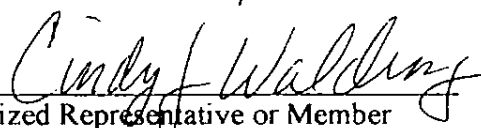
In addition to the powers authorized by the laws of the State of Florida for limited liability companies, the general nature of the business or businesses to be transacted, and which the limited liability company is authorized to transact, shall be to engage in any activity or business authorized under the Florida statutes, and as further defined in the Company's Operating Agreement.

The undersigned, being an authorized representative, or member, of the limited liability company, certifies that this instrument constitutes the Articles of Organization of **C & L ST. ARMANDS, LLC.**

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes.

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.

Executed by the undersigned on the 22 day of January, 2018.

  
\_\_\_\_\_  
Authorized Representative or Member  
Typed Name: Cindy J. Walding