

6/26/2018

Division of Corporations

**L18000155655**

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(((H18000189603 3)))



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Division of Corporations  
Fax Number : (850)617-6381

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FLORIDA  
DIVISION OF  
CORPORATIONS  
COMMERCIAL  
SERVICES

**FLORIDA LIMITED LIABILITY CO.  
COLBYCO VENTURES, LLC**

Certificate of Status	1
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Estimated Charge	\$160.00

**T COLLINS**  
**JUN 27 2018**

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ARTICLES OF ORGANIZATION

OF

COLBYCO VENTURES, LLC,

A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:

COLBYCO VENTURES, LLC, a Florida Limited Liability Company.

ARTICLE II - Address: The mailing address and the street address of the principal office of the Limited Liability Company is:


1102 S.E. Mitchell Avenue  
108 Tarpon Bay Moorings  
Port St. Lucie, Florida 34952

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

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

COLBY G. SCHINDEL  
1102 S.E. Mitchell Avenue  
108 Tarpon Bay Moorings  
Port St. Lucie, Florida 34952

*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, Florida Statutes.*

  
COLBY G. SCHINDEL, Registered Agent

FILED  
18 JUN 26 AM 11:30  
CLERK OF CIRCUIT COURT  
ALACHUA COUNTY, FLORIDA

**ARTICLE IV - Management:**

**Manager-Managed Company:** The Company is to be managed by one manager or more managers and the name of the initial manager is:

Name:

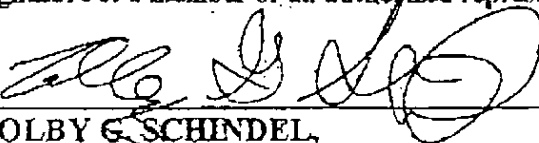
COLBY G. SCHINDEL

Address:

1102 S.E. Mitchell Avenue  
108 Tarpon Bay Moorings  
Port St. Lucie, Florida 34952

**ARTICLE V - Effective Date:** The Effective Date of these Articles of Organization is June 26, 2018.

Signature of a member or an authorized representative of a member.

  
\_\_\_\_\_  
COLBY G. SCHINDEL,  
Sole Member and Manager

(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 Section 817.155, Florida Statutes.)

FILED  
18 JUN 26 AM 11:30  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA