

H18000194574 3

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : LAW OFFICE OF KATHAN L. TOWNSEND, PA
Account Number : 120050009145
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Fax Number : (813) 988-5510

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

Email Address: _____

INVESTMENTS
FLORIDA LIMITED LIABILITY CO.
Carol Drive, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



July 3, 2018

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LAW OFFICE OF NATHAN L. TOWNSEND, PA

SUBJECT: CAROL DRIVE, LLC
REF: W18000061018

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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DANIEL L O'KEEFE
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REGISTRATION
CORPORATION
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SERVICES
①

ARTICLES OF ORGANIZATION
OF
CAROL DRIVE INVESTMENTS, LLC

ARTICLE I - NAME

The name of the limited liability company is CAROL DRIVE INVESTMENTS, LLC, ("company").

ARTICLE II - ADDRESS

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

Principal Office Address:
34830 Misty Lane
Zephyrhills, Florida 33541

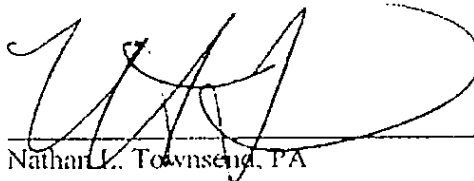
Mailing Address:
34830 Misty Lane
Zephyrhills, Florida 33541

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Nathan L. Townsend, PA
1000 Legion Place, Ste. 1200
Orlando, Florida 32801

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.



Nathan L. Townsend, PA

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ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

MGR

Carl A. Montag
34830 Misty Lane
Zephyrhills, Florida 33541

MGR

Stephanie Miller
3444 Park Sq. East
Tampa, Florida 33613

REQUIRED SIGNATURE:

Carl A. Montag

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

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 s.817.155, F.S.

Carl A. Montag

Typed or printed name of signer

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