

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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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 : 120050000145
Phone : (813) 988-5500
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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TALLAHASSEE, FLORIDA

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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
Regulatory Specialist II

FAX Aud. #: H18000194574
Letter Number: 418A00013726

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REGISTRATION
COMMERCIAL
SERVICES

00

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

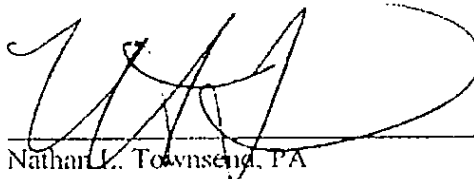
Mailing Address:
34830 Misty Lane
Zephyrhills, Florida 33541

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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TALLAHASSEE, FLORIDA