

10/4/2018



Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000289433 3)))



H180002894334BC5

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LEGALINC CORPORATE SERVICES INC.  
Account Number : I2018000011  
Phone : (844)386-0178  
Fax Number : (214)317-4754

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

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.**

**VinMar Castle Hills Golden Age Home, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
| Page Count            | 02       |
| Estimated Charge      | \$155.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

((H18000289433 3)))

ARTICLES OF ORGANIZATION  
OF  
VinMar Castle Hills Golden Age Home, LLC

The undersigned does hereby subscribe to and file these Articles of Organization for the purpose of organizing a limited liability company under the Florida Limited Liability Company Act.

ARTICLE I  
NAME

The name of this limited liability company is:  
VinMar Castle Hills Golden Age Home, LLC

ARTICLE II  
PRINCIPAL OFFICE/MAILING ADDRESS

The principal office and mailing address of this limited liability company is:

11033 Glenwood Drive,  
Coral Springs, FL 33065

ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED  
AGENT'S SIGNATURE

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

Vincent C Williams  
11033 Glenwood Drive  
Coral Springs, FL 33065

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.



Vincent C Williams, Registered Agent

((H18000289433 3)))

((H18000289433 3)))

#### ARTICLE IV MANAGEMENT

The limited liability company is to be managed by its members and is, therefore, a member-managed company. The name and address of each Manager or Managing Member is as Follows:

|  |         |
|--|---------|
| Vincent C. Williams<br>11033 Glenwood Drive<br>Coral Springs, FL 33065 | Manager |
|--|---------|

|  |        |
|--|--------|
| Marcia E. Williams,<br>11033 Glenwood Drive<br>Coral Springs, FL 33065 | Member |
|--|--------|

|   |        |
|---|--------|
| Deniece Williams-McDowell<br>4324-3 West Perimeter Road<br>Andrew's AFB, MD 20762 | Member |
|---|--------|



Vincent C. Williams

Authorized Representative of the Member  
(In accordance with Section 605.0203(1)(b), Florida  
Statutes, the execution of this document constitutes an  
affirmation under penalties of perjury that the facts stated  
herein are true.)

((H18000289433 3)))