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(Re	equestor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500
ACCOUNT NO TRANSPORTE
ACCOUNT NO. : I2000000195
REFERENCE: 835226 8021607
AUTHORIZATION: Spells de man
COST LIMIT : \$ 130.00
ORDER DATE : July 9, 2019
ORDER TIME : 12:12 PM
ORDER NO. : 835226-005
CUSTOMER NO: 8021607
DOMESTIC FILING
NAME: 35TH COURT VERO LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP  XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
CERTIFIED COPY  XX PLAIN STAMPED COPY  XX CERTIFICATE OF GOOD STANDING
XX PLAIN STAMPED COPY

de.

## COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: 354 Court Vero LC  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:
Cyothia J Ritram Name of Person
35th Court Vero LLC Firm/Company
2875 Saint Barts Sp
Vero Beach Fl 32967 City/State and Zip Code Cynthias putnama yaba Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Cyothia TP Stram 172 766-5397  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$125.00 Filing Fee \$\text{S130.00 Filing Fee & Certificate of Status}\$\$  Certificate of Status & Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
35th Court Vero LLC	
(Must contain the words "Limited Liability Company,	"L.L.C" or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited	Liability Company is:
Principal Office Address	B.F. 111

Frincipal Office Address:	Mailing Address:
2875 Saint Barts So Vero Beach, FL	2875 Saint Barts Sor Veto Brach FL 32967

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Corporation Service	ce Company	
	Name	
1201 Hays Street		
Florida street addres	ss (P.O. Box <u>NOT</u> ac	rceptable)
Tallahassee	FL	32301
City	State	Zip

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's Signature (REQUIRED)

Roxanne Turner
Asst. Vice President

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	Robert E Potram 2875 Saint Barts Sp
AMBR	Cynthia I Putnam 2015 Saint Barts Sop Vero Beach, FL 32967
<del></del>	
(Use attachment if necessary)	
LE V: Effective date, if other than the date fective date is listed, the date must be sp of filing.)	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 day neet the applicable statutory filing requirements, this date will not be 1 of State's records.
LE V: Effective date, if other than the date fective date is listed, the date must be spoof filing.) If the date inserted in this block does not nument's effective date on the Department	ecific and cannot be more than five business days prior to or 90 day neet the applicable statutory filing requirements, this date will not be 1
LE V: Effective date, if other than the date fective date is listed, the date must be spoof filing.) If the date inserted in this block does not nument's effective date on the Department	ecific and cannot be more than five business days prior to or 90 day neet the applicable statutory filing requirements, this date will not be 1
LE V: Effective date, if other than the date fective date is listed, the date must be spoof filing.) If the date inserted in this block does not nument's effective date on the Department LE VI: Other provisions, if any.  REOURED SIGNATURE:  Signature of a me This document is execut I am aware that any false	ecific and cannot be more than five busines neet the applicable statutory filing requireme

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-