

8/8/2019

Division of Corporations

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.

(((H19000237475 3)))



H190002374753ABC5

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 : HAHN LOESER & PARKS
Account Number : I20070000069
Phone : (239)254-2924
Fax Number : (239)254-2945

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

Email Address: cfilthaut@hahnlaw.com

FLORIDA LIMITED LIABILITY CO.
Our Sober Companion, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

C RICO
AUG 09 2019

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
19 AUG -9 PM 12:33

Electronic Filing Menu

Corporate Filing Menu

Help

H19000237475 3
**ARTICLES OF ORGANIZATION
OF
OUR SOBER COMPANION, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, F.S. Chapter 605, hereby makes, acknowledges and files the following Articles of Organization.

ARTICLE I - NAME

The name of this Limited Liability Company is OUR SOBER COMPANION, LLC (the "Company").

ARTICLE II - DURATION

The period of duration for the Company is perpetual.

ARTICLE III - ADDRESS

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

5811 Pelican Bay Boulevard, Suite 650
Naples, Florida 34108

ARTICLE IV - REGISTERED OFFICE AND AGENT


The initial registered office of this Company shall be HL Statutory Agent, Inc., 5811 Pelican Bay Boulevard, Suite 650, Naples, Florida 34108, and its initial registered agent at such office shall be HL Statutory Agent, Inc.

ARTICLE V - MANAGEMENT

The Company is a manager-managed limited liability company and the name and address of the elected Manager who shall serve as Manager until the first annual meeting or until his respective successor is chosen is as follows:

John D. Arthur
5811 Pelican Bay Boulevard, Suite 650
Naples, Florida 34108

Dated August 8, 2019.


Andrew J. Krause
Authorized Representative

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 AUG -9 PM 12:33

H19000237475 3

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

1. The name of the Company is OUR SOBER COMPANION, LLC
2. The name and address of the registered agent and office is:


HL Statutory Agent, Inc.
c/o Jeffrey M. Folkman, Esq.
5811 Pelican Bay Boulevard, Suite 650
Naples, Florida 34108

Having been named as registered agent of the Our Sober Companion, LLC, HL Statutory Agent, Inc., hereby consents to accept service of process for the limited liability company at the address set forth above, and accepts the appointment as registered agent and agrees to act in this capacity. By its authorized signature below, the registered agent agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties. By the authorized signature below, the registered agent signifies that it is familiar with and accepts the obligations of the position of registered agent as provided in Florida Statutes Chapter 605.

Dated August 8, 2019

HL Statutory Agent, Inc.

By:


Jeffrey M. Folkman, Vice President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 AUG - 9 PM 12:33