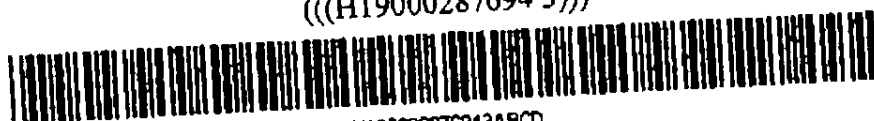


**U9000235891**

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.**

(((H19000287694 3)))



H190002876943ABCD

**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 : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
Phone : (813) 229-7600  
Fax Number : (813) 229-1660

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

Email Address: gyadley@shumaker.com

FILED  
2019 SEP 26 AM 10:54  
SECRETARY OF STATE  
TALLAHASSEE, FL

**FLORIDA LIMITED LIABILITY CO.  
Emerald Dunes of Clearwater II LLC**

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

Electronic Filing Menu

Corporate Filing Menu

Help

J. FASON

SEP 27 2019

H19000287694 3

**ARTICLES OF ORGANIZATION  
OF  
EMERALD DUNES OF CLEARWATER II LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is EMERALD DUNES OF CLEARWATER II LLC.

**ARTICLE II - Address:**

The mailing address and the principal address of the Limited Liability Company are:

Principal Address: 100 Turner Street  
Clearwater, FL 33756

Mailing Address: 100 Turner Street  
Clearwater, FL 33756

**ARTICLE III - Management:**

The Limited Liability Company is to be managed by one or more Managers elected as provided in the Operating Agreement of the Limited Liability Company.

**ARTICLE IV - Indemnification:**

The Limited Liability Company shall, to the full extent permitted by applicable law, as amended from time to time, indemnify the managers of the Limited Liability Company. The indemnification provided by this Article IV shall not limit or exclude any rights, indemnities or limitations of liabilities to which any person may be entitled, whether as a matter of law, under the regulations of the limited liability company, by agreement or otherwise.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act on this 26<sup>th</sup> day of September 2019.

  
Signature of an authorized representative of a member.

\_\_\_\_\_  
Gregory C. Yadley  
Typed or printed name of signer

OFFICE OF STATE  
CLERK  
TALLAHASSEE, FL

09 SEP 26 AM 10:54

FILED

H19000287694 3

H19000287694 3

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

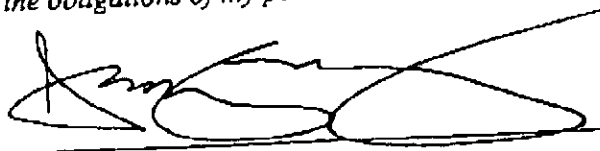
PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is **EMERALD DUNES OF CLEARWATER II LLC**.

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

Gregory C. Yadley, Esq.  
100 E. Kennedy Boulevard  
Suite 2800  
Tampa, FL 33602

*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.*

  
Signature

**FILED**

2019 SEP 26 AM 10:54

SECRETARY OF STATE  
TALLAHASSEE, FL

H19000287694 3