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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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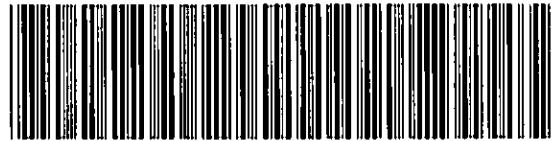
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
ATTN: PASSPORTS

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DEC 9

# AUSLEY McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

123 SOUTH CALHOUN STREET  
P.O. BOX 391 (ZIP 32302)  
TALLAHASSEE, FLORIDA 32301  
(850) 224-9115 FAX (850) 222-7560

Writer's Direct Line: (850) 425-5457

December 9, 2019

Secretary of State  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**VIA HAND DELIVERY**

Re: **Manatee Bluff L8, LLC**

Dear Madam/Sir:

Enclosed are an original and one copy of the Articles of Organization for **Manatee Bluff L8, LLC**, a limited liability company. These Articles include Registered Agent and Registered Office designation for this company. Also enclosed is our check in the amount of:

☐ \$125.00  
Filing Fee

☐ \$130.00  
Filing Fee &  
Certificate of Status

☒ \$155.00  
Filing Fee &  
Certified Copy  
(additional copy enclosed)

☐ \$160.00  
Filing Fee,  
Certified Copy &  
Certificate of Status  
(additional copy enclosed)

Please do not hesitate to call me at (850) 425-5457 if you have any questions. We will have our messenger return to pick up the certified copy and the certificate of filing.

Thank you in advance for your usual assistance in these matters.

Sincerely,



Donna Marie Walters, FRP  
Florida Registered Paralegal

/dmw  
Enclosures

**ARTICLES OF ORGANIZATION  
OF  
MANATEE BLUFF L8, LLC**

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.  
Name**

The name of the Limited Liability Company is Manatee Bluff L8, LLC.

**ARTICLE 2.  
Address**

The street and mailing address of the place of business in Florida is:

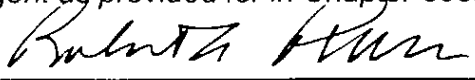
25 Tallamont Road  
Monticello, Florida 32344

**ARTICLE 3.  
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

**AUSLEY & McMULLEN, P.A.**  
Attn.: Robert A. Pierce  
123 South Calhoun Street  
Tallahassee, Florida 32301

*Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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 608, Florida Statutes.*

  
\_\_\_\_\_  
**Robert A. Pierce, Esq., for the Firm**  
Registered Agent

FILED  
19 DEC -9 PM 6:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE 4.  
Management**

The Limited Liability Company shall be managed by its Manager and is, therefore, a Manager-managed company.

**Deborah B. Shapiro, MGR**

25 Tallamont Road  
Monticello, Florida 32344

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 9th day of December, 2019.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.



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**Robert A. Pierce**

Authorized Representative of Member