# L20000145970

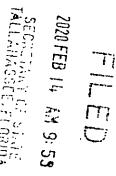
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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K Brumbley

### Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 2/14/2020			**WALK IN**
3604 EN	TEDDDISE OD 11 C		WALK IN
ENTITY NAME 3604 EN	TENENIOE DN. LLO	<u> </u>	
DOCUMENT NUMBER			
	**PLEASE FILE THE	E ATTACHED AND RETURN**	
	Plain Copy		
XXXX	Certified Copy		
	Certificate of Status		
***	LEASE OBTAIN THE FC	DLLOWING FOR THE ABOVE ENTITY**	
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	Certified Copy of Arts Certificate of Good Stan		
	**APOSTILLE' / NO	OTARIAL CERTIFICATION**	
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NUMBER OF CERTIFICAT	ES REQUESTED		_
TOTAL OWED 155.00		ACCOUNT #: I20160000072	·
		5 8 FM	
Please call Tina at the	e above number for i	any issues or concerns. Thank you so	much!

#### COVER LETTER

TO:	New Filing Sc Division of Co				
Crin III		rprise Dr LLC			
SUBJE	.CT:		imited Liabi	lity Company	
The end	closed Articles of	f Organization and fee(s)	are submitte	d for filing.	
Please r	return all corresp	ondence concerning this	matter to the	following:	
	Deborah L.	Taberskl			
	******************		Name o	f Person	
	Phillips Lyt	le LLP			
	<del></del>		Firm/C	ompany	
	One Canals	ide, 125 Main Street			
			Add	ress	
	Buffalo, Ne	w York 14203			
	Roger@addi	sonprec.com	City/State a	nd Zip Code	
		E-mail address: (to be us	ed for future	annual report notificati	ion)
For furthe	er information co	oncerning this matter, ple	ase call:		
	Deborah L.		716	504-5737	
	Nen	ne of Person	Aren Code	Daytime Telephon	e Number
Enclose	ed is a check for	the following amount:			
	i.00 Filing Fee	□\$130.00 Filing Fcc Certificate of Status	Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New I Divisi P.O. I	ng Address Filing Section ion of Corporations 30x 6327 nasseo, FL 32314		Street Address New Flling Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	er Circle

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

3604 Enteprise Dr L	LÇ		
(Must cons	tin the words "Limited Lia	bility Company, "I	L.C.," or "LLC.")
TICLE II - Address: mailing address and street a	ddress of the principal offic	ce of the Limited L	iability Company is:
Princip	al Office Address:		Mailing Address:
3604 Enteprise Drive	e	3604 1	Enteprise Drive
The Villages, Florida	a 32163 ent, Registered Office, & cannot serve as its own Ro	Registered Agent	illages, Florida 32163 's Signature: ou must designate an individual
The Villages, Florida TICLE III - Registered Age Limited Liability Company	ent, Registered Office, & cannot serve as its own Re active Florida registration.)	Registered Agent egistered Agent, Yo	's Signature:
The Villages, Florida TICLE III - Registered Age the Limited Liability Company ther business entity with an	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered as United Corporate Servi	Registered Agent egistered Agent. Ye  gent are: ces, Inc.	's Signature:
The Villages, Florida TICLE III - Registered Age the Limited Liability Company ther business entity with an	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered as United Corporate Servi	Registered Agent egistered Agent. Ye gent are:	's Signature:
The Villages, Florida TICLE III - Registered Age the Limited Liability Company ther business entity with an	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered as United Corporate Servi	Registered Agent egistered Agent. Ye gent are: ces, Inc.	's Signature:
The Villages, Florida TICLE III - Registered Age the Limited Liability Company ther business entity with an	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered as United Corporate Services	Registered Agent egistered Agent. Ye gent are: ces, Inc. Name	's Signature: ou must designate an individual
The Villages, Florida TICLE III - Registered Age the Limited Liability Company ther business entity with an	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered as United Corporate Service  9200 South Dadeland B	Registered Agent egistered Agent. Ye gent are: ces, Inc. Name	's Signature: ou must designate an individual

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)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBRIMGR	Roger Champagne 3604 Enterprise Drive The Villages, Florida 32163
AMBRIMGR	Patricia Champagne 3604 Enteprise Drive The Villages, Florida 32163
(Use attachment if necessary)  CLEV: Effective date, if other than the effective date is listed, the date must be	date of filing:  COPTIONAL)  e specific and cannot be more than five business days prior to pr 90 days
CLEV: Effective date, if other than the effective date is listed, the date must be to of filing.) If the date inserted in this block does recument's effective date on the Department.	
CLEV: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block does recurrent's effective date on the Department.	not meet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective date, if other than the effective date is fisted, the date must be to of filing.)  If the date inserted in this block does recument's effective date on the Department of the D	not meet the applicable statutory filing requirements, this date will not be listent of State's records.
CLEV: Effective date, if other than the effective date is fisted, the date must be to of filing.)  If the date inserted in this block does recurrent's effective date on the Department's effective date on the Department's CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:    Signature of this document is explain a ware that any	not meet the applicable statutory filing requirements, this date will not be listent of State's records.
CLE V: Effective date, if other than the effective date is listed, the date must be to of filing.)  If the date inserted in this block does recument's effective date on the Department of the Department of the Department of the Department of the Department is expected by the Department of the Department is expected by the Department is	cot meet the applicable statutory filing requirements, this date will not be listent of State's records.  Champer  a member or an authorized representative of a member.  Recuted in accordance with section 605.0203 (1) (b), Florida Statutes.  false information submitted in a document to the Department of State egrec felony as provided for in s.817.155, P.S.