

L20000390027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

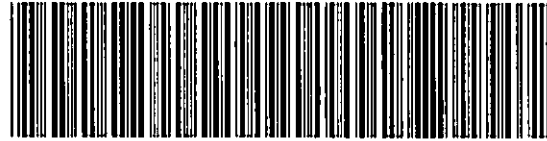
Certificates of Status _____

Special Instructions to Filing Officer:

W20000135901

effective.

Office Use Only



000354995990

11/18/20--01017--015 **135.00

2020 DEC 18 PM 8:10

FILED

The Klotz Group of Companies
645 Mayport Road, Suite 5
Atlantic Beach, FL 32233
904-247-5334

FILED
NOV 18 2020
8:10

Via FedEx

November 17, 2020

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Filing two new LLC's

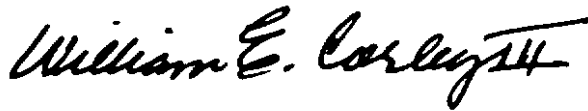
Dear Sirs:

Enclosed for filing to create two new limited liability companies, please find the following:

1. Articles of Organization for Capri Villas Acquisition, LLC.
2. Check no. 5034 in the amount of \$125.00 in full payment of the filing fee.
3. Articles of Organization for Huron Sophia Acquisition, LLC.
4. Check no. 5035 in the amount of \$125.00 in full payment of the filing fee.

Please file the above. Thank you very much.

Very truly yours,



William E. Corley, III
Chief Legal Officer

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Capri Villas Acquisition, 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:

645 Mayport Road, Suite 5
Atlantic Beach, FL 32233

Mailing Address:

645 Mayport Road, Suite 5
Atlantic Beach, FL 32233

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:

General Management and Agent Services, LLC

Name

645 Mayport Road, Suite 5

Florida street address (P.O. Box **NOT** acceptable)

<u>Atlantic Beach</u>	<u>FL</u>	<u>32233</u>
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.

GENERAL MANAGEMENT AND AGENT SERVICES, LLC

By Michael J. Gauran CHIEF LEGAL OFFICER
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2020 DEC 18 11:18:10

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Jeff Klotz

645 Mayport Road, Suite 5

Atlantic Beach, FL 32233

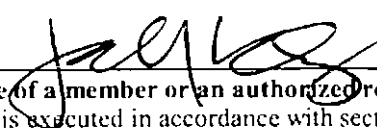
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 06/01/2011 (OPTIONAL) *mkjhl*
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Jeff Klotz, Manager

Typed or printed name of signee

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)