Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : SANDERS LAW GROUP, PA

Account Number : I20210000023
Phone : (727)328-7755

Fax Number : (727)328-7744

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

Email Address: Chris @ sanderslawgroup.com

FLORIDA LIMITED LIABILITY CO. SUNSHINE CITY COTTAGES, LLC

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ARTICLES OF ORGANIZATION OF SUNSHINE CITY COTTAGES, LLC

ARTICLE I - NAME

The name of the limited liability company is SUNSHINE CITY COTTAGES, LLC, ("company").

ARTICLE II - ADDRESS

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

Principal Office Address: 650 16th Street N.

St. Petersburg, Florida 33705

Mailing Address: 650 16th Street N.

St. Petersburg, Florida 33705

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

FELIX FUDGE 650 16th Street N. St. Petersburg, Florida 33705 TOU FEB -2 MM 10: 40

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.

FELIX FUDGE

ARTICLE IV - MANAGERS OR MEMBERS

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

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Title:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

AMBR

FELIX FUDGE 650 16th Street N.

St. Petersburg, FL 33705

AMBR

DONNA FUDGE

650 16th Street N.

St. Petersburg, FL 33705

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be February 2, 2021.

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.

FELIX FUDGE

Typed or printed name of signee