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.

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Pax Number : (850)617-6381

From:

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTER

Account Number : I20060000135 Phone : (305)789-3200 Fax Number : (305)789-4137

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

Email Address: claime.santiago@cornerstonegrp.com

FLORIDA LIMITED LIABILITY CO. CORNERSTONE CAPTIVA COVE III, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:				•	ाक धन्द्र
The name of the Limited Liability Compar	ny is:			2021 JUL -6	DM L
					rn i: g
Comerstone Cap	tiva Cove III, LLC			SECRETAR : TALLAHAS	· - :
	ords "Limited Liability	Company, "L.L.C.,	" or "LLC.")	IAC LAHAS	Set. Fil
			•		
ARTICLE II - Address: The mailing address and street address of	the principal office of t	he Limited Liability	Company is:		
Principal Office	Address:		Mailing Address:		
2100 Hollywood Blvd.		2100 Hollyw	ood Blvd.		1
Hollywood, FL, 33020		Hollywood, 1	FL, 33020		į
					[
ARTICLE III - Registered Agent, Regis	stored Office. & Regis	tered Agent's Sign	ature:		: (
(The Limited Liability Company cannot se	erve as its own Registe	red Agent. You mus	t designate an individu	al or	į
another business entity with an active Flo					ŗ
The name and the Charles store address of	felia resistered avent a				•
The name and the Florida street address o	I tite tekipteten aketit a	e.			±
Leon J	. Wolfe				
	Name				}
2100 F	follywood Blyd.				•
	a street address (P.O. I	ox <u>NOT</u> acceptabl	(c)		
** "		•	33020		
Holly			Zip		
	City St	ate	Zip		
Having been named as registered agent and					
place designated in this certificate, I hereby					
further agree to comply with the provisions of am familiar with and accept the obligations					
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	V	ΔÍΛ			:
	Registered to	ent's Signature (RE	THRED)		ļ
	VeRiziered WR	an a aignaidhe (RE	(AOIVED)		-

(CONTINUED)

Title:	Name and Address:
'AMBR" = Authorized Me	ember
'MGR" = Manager	
MGR	Jorge Lopez
	2100 Hollywood Blvd. Hollywood, FL 33020
	Holly Woods, I E 33025
MGR	Leon J. Wolfe
	2100 Hollywood Blvd.
	Hollywood, FL 33020
\	Man S Modes
MGR	Mara S. Mades 2100 Hollywood Blvd.
	Hollywood, FL, 33020
	in ind
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(Use attachment if necessa	ary)
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E V: Effective date, if other ective date is listed, the date filling.) the date inserted in this blument's effective date on the E VI: Other provisions, if a REQUIRED SIGNATURE Signature of the superior of	er than the date of filing:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

S 30.00 Certified Copy (Optional)
S 5.00 Certificate of Status (Optional)

ARTICLE IV-