

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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#### FLORIDA LIMITED LIABILITY CO. AUDMER, LLC

| Certificate of Status | Ū        |
|-----------------------|----------|
| Certified Copy        | 1        |
| Page Count            | 04       |
| Estimated Charge      | \$155.00 |

#### ARTICLES OF ORGANIZATION

AUDMER, LLC, a Florida limited liability company

ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

AUDMER, LLC

#### ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS

The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

900 8th Avenue South Unit 301 Naples, Florida 34102

### ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Bruce Tomason 900 8th Avenue South Unit 301 Naples, Florida 34102

# ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement of the Limited Liability Company. The initial Manager shall be as follows:

Bruce Tomason 900 8th Avenue South Unit 301 Naples, Florida 34102

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From; Kimberly Laughrey

These Articles of Organization have been executed as of the \_\_\_\_\_ day of October, 2021.

"MANAGER"

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 605.0203 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

#### AUDMER, LLC

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

Bruce Tomason 900 8th Avenue South Unit 301 Naples, Florida 34102

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: October \_\_/\_, 2021

"REGISTERED AGENT"