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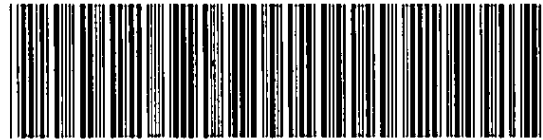
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COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Charles S. Simcox, PLLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing

Please return all correspondence concerning this matter to the following:

David M. Platt
Name of Person

David M. Platt, P.A.
Firm/Company

2427 Periwinkle Way, Ste. B
Address

Sanibel, Florida 33957
City/State and Zip Code

david.platt@sancaplaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David M. Platt 239 472-5400
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|--|--|---|---|

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

FAX AUDIT NO.:

**ARTICLES OF ORGANIZATION
OF
CHARLES S. SIMCOX, PLLC**

ARTICLE I

NAME

The name of the limited liability company shall be Charles S. Simcox, PLLC. (the "Company").

ARTICLE II

MAILING AND STREET ADDRESS

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

1434 Sand Castle Rd.
Sanibel, Florida 33957

ARTICLE III

PURPOSE

The purpose of the Company is to engage in every aspect of the real estate profession, and in any other activity permitted by a Company formed for such purpose.

ARTICLE IV

INITIAL REGISTERED AGENT AND OFFICE

The name and street address of the initial registered agent of the Company are:

| <u>Name</u> | <u>Address</u> |
|-------------------|--|
| Charles S. Simcox | 1434 Sand Castle Rd. Sanibel, Florida 33957 |

ARTICLE V

MANAGEMENT OF THE COMPANY

The Company shall be managed by not less than one (1) manager (the "Manager") and is, therefore, a manager-managed company. The following are the names and address of the initial Manager, who shall serve as Manager of the Company until her successor is elected and qualified:

FAX AUDIT NO.:

FAX AUDIT NO.:

Name

Charles S. Simcox

Address

1434 Sand Castle Rd.
Sanibel, Florida 33957

ARTICLE VI

OPERATING AGREEMENT

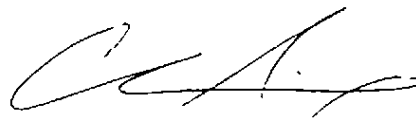
The Member shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

ARTICLE VII

EFFECTIVE DATE

This limited liability company's existence shall commence upon the filing of these Articles and shall terminate as provided for in the Operating Agreement.

The undersigned, being an authorized representative of the Member of the Company, has executed these Articles of Organization this 26th day of October, 2021



Charles S. Simcox
Authorized Representative

FAX AUDIT NO.:

FAX AUDIT NO.:

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

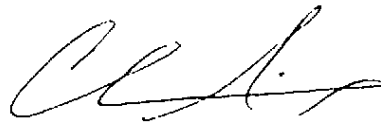
PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

Charles S. Simcox, PLLC, LLC.
2. The name and address of the registered agent and office is:

Charles S. Simcox
1434 Sand Castle Rd.
Sanibel, Florida 33957

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, Florida Statutes.



Charles S. Simcox

FAX AUDIT NO.: