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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	07/26/2022	wil SW
		Acc#I20160000072	4: ()-W
Name:	Lakeside Tr	ravel RV MGR, LLC	
Document #:			
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COVERLETTER

	New Filing Sec Division of Cor				
A	Lakeside T	Travel RV MGR, LL	C		
SUBJEC	l:	Name	of Limited Liab	ility Company	
The enclos		Organization and fee			
Please rett	urn all correspo	indence concerning t	his matter to the	following:	
	Dugan Kelle	У			
			Name o	of Person	
	Kelley Clar	ke, PC			
			Firm/C	Company	
	603 E Broad	-			
	•		Ado	dress	
	Prosper, TX	75078			
	tessa@kelleye	clarke.com	City/State:	and Zip Code	
	i	E-mail address: (to be	used for future	annual report notificati	on)
For further	information co	ncerning this matter,	please call:		
	Tessa Hopkii	18	469	584-6557)	
	Nam	e of Person	Area Code	Daytime Telephon	e Number
Enclosed	is a check for t	he following amount	:		
□\$125.0	0 Filing Fee	□\$130.00 Filing Certificate of Stat	us Cert	55.00 Filing Fee & ified Copy is enclosed)	☐\$160.00 Filing—Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	ng Address iling Section on of Corporations iox 6327 assee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230	assee Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	EI - Name:				
The name	of the Limited Liabilit	y Company is:			
	Lakeside Travel RV	MGR LLC			
		ain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")	
	EII - Address: ig address and street a	ddress of the principal o	office of the Limited	Liability Company is:	
	<u>Princip</u>	al Office Address:		Mailing Add	dress:
	603 E Broadway Stro	eet	603	E Broadway Street	
	Prosper, TX 75078		Prosper, TX 75078		
					
	•	active Florida registration address of the registered of the CT Corporation Sys	d agent are:		
		1200 South Pine Isla	ind Road		
		Florida street addres		cceptable)	
		Plantation	_ Florida	33324	
		City	State	Zip	
place desigr further agre	nated in this certificate, e to comply with the pr	agent and to accept serv I hereby accept the app vovisions of all statutes r oligations of my position C T Corporation By:	noiniment as registers elating to the proper as registered agent of System	ed agent and agree to ac and complete performa	et in this capacity. I mee of my duties, and I ver 605, F.S.,
		Regist	tered Agent's Signat	ure (REQUIRED)	_

(CONTINUED)

١	ĸ	TI	(1.	E.	IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Joanne Schmidt
Wich	603 E Broadway Street
	Prosper, TX 75078
(Use attachment if necessary) FIGLE V: Effective date, if other than th	e date of filing:
in effective date is listed, the date must	be specific and cannot be more than five business days prior to or 90 days aft
late of filing.)	and the Part I was a second Climan and the second s
e: 11 the date inserted in this block does locument's effective date on the Depart	s not meet the applicable statutory filing requirements, this date will not be listed
document's effective date on the Depart	injett of State's records.
TCLE VI: Other provisions, if any.	
TCLE VI: Other provisions, if any.	
TCLE VI: Other provisions, if any.	
TCLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
REOUIRED SIGNATURE:	P-4
REOUIRED SIGNATURE: Signature o	f a member or an authorized representative of a member.
REOUIRED SIGNATURE: Signature o This document is	executed in accordance with section 605.0203 (1) (b). Florida Statutes.
REOUIRED SIGNATURE: Signature o This document is o I am aware that an	executed in accordance with section 605.0203 (1) (b). Florida Statutes. y false information submitted in a document to the Department of State
REOUIRED SIGNATURE: Signature of This document is of 1 am aware that an	executed in accordance with section 605.0203 (1) (b). Florida Statutes.
Signature o This document is of I am aware that an	executed in accordance with section 605.0203 (1) (b). Florida Statutes, y false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.

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)

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