

L22000405251

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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.

((H22000323650 3)))



H220003236503ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : NELSON MULLINS RILEY & SCARBOROUGH LLP
Account Number : I20160000074
Phone : (407)839-4277
Fax Number : (407)839-4264

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

Email Address: timothy.perry@dukerealty.com

FLORIDA LIMITED LIABILITY CO.

Timothy J Perry, LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$125.00

2022 SEP 19 PM 12:18

2022 SEP 19 AM 11:16

DocuSign Envelope ID: 50363FFA-8BE0-4259-8F67-7EA5679ED842

Fax Audit No. H22000323650 3

ARTICLES OF ORGANIZATION**OF****TIMOTHY J PERRY, LLC**

The undersigned, acting as the organizer and authorized representative of **TIMOTHY J PERRY, LLC**, under the Florida Revised Limited Liability Company Act, Chapter 605, Fla. Stat., adopts the following Articles of Organization:

ARTICLE I – Name:

The name of the limited liability company is: Timothy J Perry, LLC (the “Company”).

ARTICLE II – Address:

The mailing address and street address of the principal office of the limited liability company is: 3018 Hoffner Avenue, Belle Isle, FL 32812.

ARTICLE III – Duration:

The period of duration for the Company shall be perpetual, unless dissolved in accordance with the terms of the operating agreement of the Company in effect from time to time (the “Operating Agreement”).

ARTICLE IV – Management:

The Company is to be managed by a manager. Unless otherwise replaced pursuant to the terms of the Operating Agreement, the individual listed below shall serve as the Company’s manager.

NAME**ADDRESS**

Tim Perry

3018 Hoffner Avenue, Belle Isle, FL 32812

ARTICLE V – Admission of Members:

The Company shall admit members only in the manner prescribed by the Operating Agreement.

Fax Audit No. H22000323650 3

ARTICLE VI – Adoption of Operating Agreement:

The Company shall adopt an Operating Agreement, which may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with these Articles of Organization or Chapter 605, Fla. Stat.

ARTICLE VII – Initial Registered Agent and Office:

The initial registered agent for the Company is: Tim Perry, and the street address of the Company's initial registered office is: 3018 Hoffner Avenue, Belle Isle, FL 32812.

ARTICLE VIII – Amendments:

The Company reserves the right to amend any provision of these Articles of Organization, which amendment shall only be effectuated in the manner prescribed by the Operating Agreement.

ARTICLE IX – Indemnification:

Each individual or entity who is or was a member or manager of the Company (and the heirs, executor, personal representatives, administrators, successors, and assigns of such individual or entity) who was, or is, made a party to, or is involved in any threatened, pending, or completed action, suit, or proceeding, whether civil, criminal, administrative, or investigative, by reason of the fact that such person is or was a member or manager of the Company (each, an "Indemnitee"), shall be indemnified and held harmless by the Company to the fullest extent permitted by applicable law, as the same exists or may hereafter be amended. In addition to the indemnification conferred in this Article, each Indemnitee shall also be entitled to have paid directly by the Company the expenses reasonably incurred in defending any such proceeding against such Indemnitee in advance of its final disposition, to the fullest extent authorized by applicable law, as the same exists or may hereafter be amended. The rights and authority conferred in this Article shall not be exclusive of any other right which any person may have or hereafter acquire under any statute, or under any provision of these Articles of Organization, the Operating Agreement, or any other agreement, vote of members, or otherwise. Any repeal or amendment of this Article shall not adversely affect any right or protection of a member, manager, or officer existing at the time of such repeal or amendment.

ARTICLE X – Continuation of Business:

Unless dissolved in accordance with the Operating Agreement, the remaining members shall continue the business of the Company, which shall not be dissolved, upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member.

DocuSign Envelope ID: 50363FFA-88E0-4259-8F67-7EA5679ED842

Fax Audit No. H22000323650 3

[Remainder of Page Intentionally Blank. Signature Page Follows.]

2022 SEP 19 AM 11:16

1. I, [Name], do hereby certify that the above information is true and correct to the best of my knowledge and belief.

2. I, [Name], do hereby certify that the above information is true and correct to the best of my knowledge and belief.

3. I, [Name], do hereby certify that the above information is true and correct to the best of my knowledge and belief.

4. I, [Name], do hereby certify that the above information is true and correct to the best of my knowledge and belief.

5. I, [Name], do hereby certify that the above information is true and correct to the best of my knowledge and belief.

6. I, [Name], do hereby certify that the above information is true and correct to the best of my knowledge and belief.

7. I, [Name], do hereby certify that the above information is true and correct to the best of my knowledge and belief.

8. I, [Name], do hereby certify that the above information is true and correct to the best of my knowledge and belief.


9. I, [Name], do hereby certify that the above information is true and correct to the best of my knowledge and belief.

10. I, [Name], do hereby certify that the above information is true and correct to the best of my knowledge and belief.

DocuSign Envelope ID: 50363FFA-8BE0-4259-8F67-7EA5679ED842

Fax Audit No. H22000323650 3

IN WITNESS WHEREOF, the undersigned Authorized Representative has executed these Articles of Organization to be effective on the date of their filing with the Florida Secretary of State.

DocuSigned by:

 By: CA3AACBD3C6E459...
Tim Perry, as Authorized Representative

SEP 19 AM 11:16

[illegible]

DocuSign Envelope ID: 50363FFA-8BED-4259-8F67-7EA5679ED842

Fax Audit No. H22000323650 3

**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: Timothy J Perry, LLC.
2. The name and address of the registered agent and office is:

Tim Perry
3018 Hoffner Avenue, Belle Isle, FL 32812

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.

DocuSigned by:


CA3AACBU3C6E459...

Tim Perry

22 SEP 19 11:16 AM

Fax Audit No. H22000323650 3