

**Division of Corporations** Electronic Filing Cover Sheet

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Division of Corporations

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* SARALKIDD6@GMAIL.COM

Email Address:

## FLORIDA LIMITED LIABILITY CO.

## Sun N' Sand Homewatch LLC

Certificate of Status	
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")  ICLE II - Address: mailing address and street address of the principal office of the Limited Liability Company is:  sipal Office Address:  4 Cushman Circle Myers, FL 33901  ICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual ter business entity with an active Florida registration.)  name and the Florida street address of the registered agent are:  Sara Varnell  Name  1664 Cushman Circle Florida street address of the registered agent are:  Sara Varnell  Name  1664 Cushman Circle Florida street address (P.O. Box NOT acceptable)  Fort Myers  FL 33901  City  Zip  ing been named us registered agent and to accept service of process for the above stated limited liability of the place designated in this certificate. I hereby accept the appointment as registered agent and agree to accept. If urther agree to comply with the provisions of all statutes relating to the proper and complete per finy duties, and I am familiar with and accept the obligations of my position as registered agent as provide.			and Homewatch LLC			<b>-</b> -
Mailing address and street address of the principal office of the Limited Liability Company is:    Mailing Address:	+	(Must end with the wor	ords "Limited Liability Compan	y, "L.L.C.," or "Li	.C.")	
4 Cushman Circle  Myers, FL 33901  ICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual registress entity with an active Florida registration.)  Tame and the Florida street address of the registered agent are:  Sara Varnell  Name  1664 Cushman Circle  Florida street address (P.O. Box NOT acceptable)  Fort Myers  FIL 33901  City  Zip  The place designated in this certificate, I hereby accept the appointment as registered agent and agree to acceptable, I further agree to comply with the provisions of all statutes relating to the proper and complete per finy duties, and I am familiar with and accept the obligations of my position as registered agent as provided.			ne principal office of the Limite	d Liability Compar	ny is:	
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Registered Agent's Signature (REQUIRED)	aving been named o the place designat vapacity. I further o	Sara Varnell  1664 Cushman Florida street addre Fort Myers Cit us registered agent and ed in this certificate, 11 agree to comply with the	Name  Circle  ess (P.O. Box NOT acceptable)  FI. 3390  aty Z  I to accept service of process for the appointment of the provisions of all statutes relationaccept the obligations of my post Chapter 605, F.S.	ip the above stated li as registered agent ing to the proper ar	and agree	e . H

Page 1 of 2

Sara Varnell (CONTINUED)

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Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
AMBR ~	Sara Varnell	
	1664 Cushman Circle	
	Fort Myers, FL 33901	
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