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PICK UP: **MISTY 6/13 CERTIFIED COPY** XX**PHOTOCOPY CUS** LLC\_ XXFILING SWEETWATER RANCH LAND, LLC (CORPORATE NAME AND DOCUMENT #) SPECIAL **INSTRUCTIONS:** 

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

tain the words "Limited Lia address of the principal office al Office Address:  N., #112  ent, Registered Office, & I cannot serve as its own Reactive Florida registration.) address of the registered ag	e of the Limited L  5020 Naple Registered Agent gistered Agent. Y	Liability Company is:  Mailing Address:  Tamiami Trail N., #112 es, FL 34103
ent, Registered Office, & I v cannot serve as its own Reactive Florida registration.)	5020 Naple Registered Agent gistered Agent. Y	Mailing Address: Tamiami Trail N., #112 es, FL 34103 t's Signature:
ent, Registered Office, & ly cannot serve as its own Reactive Florida registration.) address of the registered ag	Naple Registered Agent gistered Agent. Y	Tamiami Trail N., #112 es, FL 34103 t's Signature:
ent, Registered Office, & ly cannot serve as its own Restrict Florida registration.) address of the registered ag	Naple Registered Agent gistered Agent. Y	es, FL 34103 t's Signature:
cannot serve as its own Re active Florida registration.) address of the registered ag	Registered Agent gistered Agent. Y	t's Signature:
cannot serve as its own Re active Florida registration.) address of the registered ag	gistered Agent. Y	t's Signature: 'ou must designate an individual or
	ame	<del></del>
5020 Tamiami Trail N.,	#112	
Florida street address (P	.O. Box <u>NOT</u> acc	ceptable)
Naples	FL	34103
City	State	Zip
. I hereby accept the appoint rovisions of all statutes relat	ment as registered ing to the proper d	d agent and agree to act in this capacity and complete performance of my duties,
	agent and to accept service of I hereby accept the appoint covisions of all statutes relati	agent and to accept service of process for the agent and to accept the appointment as registered rovisions of all statutes relating to the proper obligations of my position as registered agent as

(CONTINUED)

## ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR Andrew J. Saluan 5020 Tamiami Trail N., #112 Naples, FL 34103 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. This limited liability company is a manager-managed limited liability company. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member.

constitutes a third degree felony as provided for in s.817.155, F.S.

Jeff Novatt, Esq., Authorized Representative

Typed or printed name of signee

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State

#### 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)