

L23000546506

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.

((H23000415164 3)))



H230004151643ABC

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 : LYONS & LYONS, P.A.
Account Number : I20030000061
Phone : (239)948-1823
Fax Number : (239)948-1826

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

Email Address: richard.lyons@lyons-law.com

**FLORIDA LIMITED LIABILITY CO.
5333 MAJESTIC COURT, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

2023 DEC 11 PM 3:57
SEC. OF STATE
TALLAHASSEE, FL

FILED

((H23000415164 3))

ARTICLES OF ORGANIZATION
OF
5333 MAJESTIC COURT, LLC

ARTICLE I – NAME

The name of the limited liability company is 5333 Majestic Court, LLC, (the "Company").

ARTICLE II – ADDRESS

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

Principal Office Address:

14467 Marsala Way
Naples, Florida 34109-3233

Mailing Address:

14467 Marsala Way
Naples, Florida 34109-3233

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

L&L PARA, Ltd. Co.
27911 Crown Lake Boulevard, Suite 209
Bonita Springs, Florida 34135

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, F.S.

L&L PARA, Ltd. Co. a
Florida limited liability company

By: Linda M. Stevens
Linda Stevens
Its: Manager

STATE OF FLORIDA
TALLAHASSEE, FL

2023 DEC 11 PM 3:57

FILED

(((H23000415164 3)))

ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

MGR

Robert A. Malburg
14467 Marsala Way
Naples, Florida 34109-3233

REQUIRED SIGNATURE:

DocuSigned by:

Robert A. Malburg

Signature of a member or an authorized representative of a member.

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

Robert A. Malburg

Typed or printed name of signer

FILED
2023 DEC 11 PM 3:57
TALLAHASSEE, FL
DEPARTMENT OF STATE

(((H23000415164 3)))