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Certified Copies		_ Ce	rtificates	of Status	
Special instruc	tions to	Filing Off	icer		•

Office Use Only



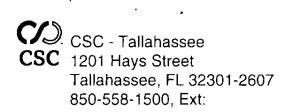
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RECEIVED



To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext:

Date: 03/08/24 Order #: 1445864-1

Re: Newberry Housewrights, LLC Processing Method: Routine

#### TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$125.0 - FL State Account Number:

120000000195

auth

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

Tallahassee, FL 32314

#### COVER LETTER

	New Filing Sec Division of Cor								
SUBJEC <sup>*</sup>	Newherry I	Housewrights, LLC							
30130120	••	Name	of Lim	ited Liabi	lity Company		-		
The enclo	sed Articles of	Organization and fee	e(s) are	submitte	d for filing.				
Please reti	urn all correspo	ondence concerning t	his ma	tter to the	following:				
	Brian A. Cor	rdero							
				Name o	f Person				
	Woods Weic	lenmiller, Michetti &	k Rudn	ick, LLP					
				Firm/C	ompany				
	9045 Strada	Stell Court, 4th Floo	)ţ						
		· -		Add	ress				
	Naples, FL 3	4109							
			Ci	ty/State a	nd Zip Code		_		
		vfirmnaples.com E-mail address: (to be	e used	for future	annual report notificat	ion)	• •		
For further	information co	ncerning this matter,	please	call:			. (5) 1 (5)	202	
	Brian A. Coro		23 at (	9	325-4070 _)_			5° 4!	j
	Name	e of Person	Ar	ea Code	Daytime Telephor	e Number	- 当2 62 63 63	60 1	123
Enclosed i	s a check for th	ne following amount:	:				11 (3) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A		]
□\$125.00	) Filing Fee	□\$130.00 Filing I Certificate of State		Certif	55.00 Filing Fee & ied Copy nal copy is enclosed)	Certificat Certified	Filing Fee 0 Filing Fee e of Status & Copy copy is enclo		
	New Fi Divisio	g Address iling Section on of Corporations ox 6327			Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre	assee			

Tallahassee, Fl. 32303

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Newberry Housewrights, LLC	
(Must contain the words "Limited Liabili	ty Company, "L.L.C" or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office o	f the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3757 Pleasant Springs Drive	3757 Pleasant Springs Drive
Naples, Fl. 34119	Naples, Fl. 34119
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Regist another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent	are:
WWMR Statutory Agent, L	LC

Name

9045 Strada Stell Court, 4th Floor

Florida street address (P.O. Box NOT acceptable)

 Naples
 FL
 34109

 City
 State
 Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
<u>MGR</u>	Christina A. Reppucci
	3757 Pleasant Springs Drive Naples, FL 34119
	Napies, PL 54119
·	
	<u> </u>
·-·-·	
	<del></del>
(Use attachment if necessary)	
(350 4114-111411 11 11003241 1-7	
ARTICLE V: Effective date, if other than the date of	of filing: (OPTIONAL)
(If an effective date is listed, the date must be sne	ecific and cannot be more than five business days prior to or 90 days after
the date of filing.)	
	neet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Department of	
the document is erroutive date on the respaintment of	A Mare 5 records.
ARTICLE VI: Other provisions, if any.	
<u> </u>	
	<u> </u>
	<u>rij</u>
REQUIRED SIGNATURE:	etter.
( <b>.</b>	(5-1 c)
_ Clinistina a. Rep	mber or an authorized representative of a member.
Signature of a mer	mber or an authorized representative of a member.
This document is execute	ed in accordance with section 605.0203 (1) (b). Florida Statutes.
	information submitted in a document to the Department of States
constitutes a third degree	felony as provided for in s.817.155, F.S.
·	
Christina A. Repp	Typed or printed name of signee
	ryped or printed name of signee

## Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- S 5.00 Certificate of Status (Optional)