L24000406458

	(Requestor's Name)		
	(Address)		
	(,		
•	(Address)	•	
	(City/State/Zip/Phone #)		
	(City/State/Zip/Phone #)		
☐ PICK-U	□ WAIT	MAIL	
	(Business Entity Name)		
	(Document Number)		
	,		
Certified Copies Certificates of Status			
Special Instructions	s to Filing Officer.		
L	-		

Office Use Only



500435438965

TALL SCHOOL STAT

nyi. SEP 20 EH 9:

RECEIVED



CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 Fast 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PICK	UP: <u>JENA 9/20</u>	
	CERTIFIED COPY		
XX	РНОТОСОРУ		
	GS		2024 SEP
XX	FILING	LLC	25
1.	CLRT TAMPA, LLC		SCHOOL SC
	(CORPORATE NAME AND DOCL	MENT#)	· · · · · · · · · · · · · · · · · · ·
2.			
	(CORPORATE NAME AND DOCK	MENT #)	
3.			
	(CORPORATE NAME AND DOCU	MENT#)	
4.	(CORPORATE NAME AND DOCK	241520 (5	
	(CORPORATE NAME AND DOCK	IMP.N 1 #)	
5.	(CORPORATE NAME AND DOCU	SMENT #)	
		,	
6.	(CORPORATE NAME AND DOCK	JMENT #)	
eneor . i			
SPECIAL	LINSTRUCTIONS:		

FOR CLRT TAMPA, LLC

The undersigned Organizer, desiring to form a limited liability company pursuant to the provisions of the Florida Revised Limited Liability Company Act (the "Act"), hereby submits, and files with the Florida Department of State, the following Articles of Organization.

ARTICLE I — NAME:

The name of the Limited Liability Company shall be: CLRT Tampa, LLC (the "Company").

ARTICLE II — ADDRESS:

The mailing address and street address of the principal office of the Company shall be as follows:

4200 W. Cypress Street, #700 Tampa, FL 33607

ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:

The address of the initial registered office of the Company in the State of Florida is One Lake Morton Drive, Lakeland, Florida 33801, and the name of the registered agent at such address is Keith C. Smith, Esquire.

ARTICLE IV - MANAGEMENT:

The Company shall be managed by one or more Managers. The names and addresses of the initial Managers are:

Trip Higginbotham 4200 W. Cypress Street, #700 Tampa, FL 33607 Raymond Berard 4200 W. Cypress Street, #700 Tampa, FL 33607

Lynne Boyle 4200 W. Cypress Street, #700 Tampa, FL 33607 Christopher B. Roussel 1700 Summit Lake Dr, Suite 200 Tallahassee, FL 32317

IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this 9/20/2024. In accordance with Section 605.0201 of the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Christopher B. Rousel, Organizer

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 605.0113, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

1 771		C . 1		
1. 11	ie name (of the	company	18:

CLRT Tampa, LLC

2. The name and address of the registered agent and office is:

Keith C. Smith, Esquire One Lake Morton Drive Lakeland, Florida 33801

Christopher B. Rousel

Christopher B. Roussel, Organizer

9/20/2024

DATE

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.

DATE

KEITH C. SMITH, ESQUIRE 9/20/2024