

L25000040890
 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.

(((H25000038426 3)))



H2500003842634BC

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 : WHITE/PETERMAN PROPERTIES, INC.
 Account Number : T20210000047
 Phone : (219)757-3730
 Fax Number : (219)680-4255

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

Email Address: smustafa@whitepeterman.com

**FLORIDA LIMITED LIABILITY CO.
 484 VF, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

RECEIVED

2025 JAN 31 PM 2:55

ELECTRONIC FILING MENU
 TALLAHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

Help

2025 JAN 31 PM 3:10
 DEPARTMENT OF STATE
 TALLAHASSEE, FL

FILED

FAX AUDIT NO.: H25000038426 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

484 VF, LLC

ARTICLE II – Address:

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

Principal Office Address: 2225 East Edgewood Drive
Suite 14
Lakeland, Florida 33803

Mailing Address: 9800 Connecticut Drive
Suite A1-100
Crown Point Indiana 46307

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

CT Corporation System
Name

1200 S. Pine Island Road
Florida Street Address (No P.O. Box)

Plantation, Florida 33324
City, State, and Zip code

2025 JAN 31 PM 3:10
FILED
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Jane Zachritz
Registered Agent's Signature
Jane Zachritz, Asst. Secretary

FAX AUDIT NO.: H25000038426 3

FAX AUDIT NO.: H25000038426 3

ARTICLE IV – Manager(s), Officers:

The Company shall be Manager Managed. The Names and Addresses of each person authorized to manage or control the Limited Liability Company:

Title:

"MGR" = Manager

"AP" = Authorized Person

Name and Address:

MGR

View Florida, LLC
2225 East Edgewood Drive
Suite 14
Lakeland, Florida 33803

AP

Pete Schroeder
President – View Florida, LLC
2225 East Edgewood Drive
Suite 14
Lakeland, Florida 33803

AP

Michael Schroeder
Vice President – View Florida, LLC
2225 East Edgewood Drive
Suite 14
Lakeland, Florida 33803

AP

Kevin Carlson
Treasurer – View Florida, LLC
9800 Connecticut Dr.
Suite A-1-100
Crown Point, Indiana 46307

AP

Jason Weisler
Secretary – View Florida, LLC
9800 Connecticut Dr.
Suite A-1-100
Crown Point, Indiana 46307

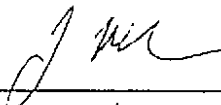
SECRETARY OF STATE
TALLAHASSEE, FL
2025 JAN 31 PM 3:10

FILED

FAX AUDIT NO.: H25000038426 3

FAX AUDIT NO.: H25000038426 3

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Jason Weisler, Secretary of View Florida, LLC

Type or print name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization & Designation of Registered Agent
- \$30.00 Certified Copy (Optional)
- \$5.00 Certificate of Status (Optional)

FILED
 2025 JAN 31 PM 3:10
 SECRETARY OF STATE
 TALLAHASSEE, FL

FAX AUDIT NO.: H25000038426 3