

295000000509

**BASILE & BRANDT**

LAW OFFICES

MEADOW PLACE

200 NORTH MAIN STREET

EAST LONGMEADOW, MASSACHUSETTS 01020

JOSEPH J. BASILE, JR.  
LAUREL H. BRANDT

TELEPHONE (413) 525-6630  
TELECOPIER (413) 525-4441

June 26, 1995

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

4000001527884  
-06/30/95--01019--001  
\*\*\*\*285.00 \*\*\*\*285.00

Re: Captiva Island, L.C.

Dear Sir or Madam:

I have enclosed the following in connection with the formation of Captiva Island, L.C. as a limited liability company under the Florida Limited Liability Company Act:

1. Original and photocopy of Articles of Organization;
2. Affidavit of Membership and Contributions;
3. Certificate of Designation of Registered Agent/Registered Office; and
4. Check in the amount of \$285 in payment of the filing fees for the Articles of Organization and Designation of Registered Agent.

I would appreciate your accepting these documents for filing and acknowledge your filing of the documents by returning the photocopy of the Articles of Organization, stamped "filed" together with the date and time of filing, to me in the enclosed self-addressed, stamped envelope.

Thank you in advance for your assistance. If you have any questions, please do not hesitate to call me.

Sincerely,



Joseph J. Basile, Jr.

JJB/s  
encls.

cc: Drs. Robert and Jody Rossetti

D. BROWN JUL - 5 1995

FILED  
95 JUN 29 AM 10:15  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
CAPTIVA ISLAND, L. C.**

**FILED**  
95 JUN 29 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Article I - Name**

The name of the limited liability company is Captiva Island, L.C. (the "Company").

**Article II - Duration**

The period of duration for the Company shall be perpetual.

**Article III - Address of Principal Office**

The mailing address and the street address of the principal office of the Company shall be Captiva Island, L.C. c/o Robert A. Rossetti, 160 Barndoor Hills Road, Suffield, Connecticut, 06078.

**Article IV - Registered Agent**

The name and street address of the Company's initial registered agent in Florida is C T Corporation System, c/o C T Corporation, 1200 South Pine Island Road, Plantation, Florida 33324.

**Article V - Management**

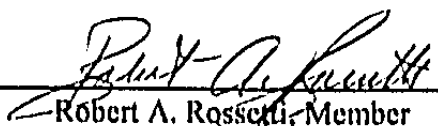
Management of the Company is reserved to the members. The names and addresses of the managing members are:

Robert A. Rossetti  
160 Barndoor Hills Road  
Suffield, Connecticut, 06078

and

Jody C. Possetti  
160 Barnoor Hills Road  
Suffield, Connecticut, 06078

Dated this 23 day of June, 1995.

  
Robert A. Rossetti, Member

(In accordance with section 608.408(3),  
Florida Statutes, the execution of these Articles  
of Organization constitutes an affirmation under  
the penalties of perjury that the facts stated  
herein are true.)

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS**  
**OF**  
**CAPTIVA ISLAND, L. C.**

The undersigned member of Captiva Island, L.C. (the "Company"), deposes and says:

1. The Company has at least two members;
2. The total amount of cash contributed by the members is \$ 0;
3. The agreed value of property other than cash contributed by the members is \$0; and
4. The total amount of cash or property anticipated to be contributed by the members is \$45,000. This total includes amounts from items 2 and 3 above.

Dated this 23 day of June, 1995.

  
Robert A. Rossetti, Member

(In accordance with section 608.408(3),  
Florida Statutes, the execution of this affidavit  
constitutes an affirmation under the penalties of  
perjury that the facts stated herein are true.)

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Captiva Island, L.C.

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

C T CORPORATION SYSTEM  
(Name)  
c/o C T CORPORATION, 1200 South Pine Island Road,  
(P.O. Box not acceptable)  
Plantation, Florida 33324  
(City/State/Zip)

FILED  
95 JUN 29 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

C T CORPORATION SYSTEM

Patricia A. Canario  
(Signature)

6/19/95  
(Date)

PATRICIA A. CANARIO,  
SPECIAL ASSISTANT SECRETARY  
(Title)

**FILING FEE: \$ 35 for Designation of Registered Agent**

L95000000509

BASILE & BRANDT  
LAW OFFICES

MEADOW PLACE  
200 NORTH MAIN STREET  
EAST LONGMEADOW, MASSACHUSETTS 01026

JOSEPH J. BASILE, JR.  
LAUREL H. BRANDT

TELEPHONE (413) 525-6630  
TELECOPIER (413) 525-4441

September 6, 1995

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

000001582810  
-09/12/95--01085--001  
\*\*\*\*250.00 \*\*\*\*250.00

Re: Captiva Island, L.C.

Dear Sir or Madam:

I have enclosed a Supplemental Affidavit of Membership and Contributions for Captiva Island, L.C. and a check in the amount of \$250 in payment of the filing fee.

Thank you in advance for your assistance. If you have any questions, please do not hesitate to call me.

Sincerely,

*Joseph J. Basile, Jr.*  
Joseph J. Basile, Jr.

JJB/s  
encls.

cc: Drs. Robert and Jody Rossetti

SH SEP 18 1995

*Contributions  
increase*


FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 SEP 13 PM 3:53

SUPPLEMENTAL AFFIDAVIT OF CONTRIBUTIONS  
OF  
CAPTIVA ISLAND, L. C.

Pursuant to section 608.412, Florida Statutes, the undersigned member of Captiva Island, L.C., deposes and says:

1. The total amount of cash contributed by the members is \$109,079.56;
2. The agreed value of property other than cash contributed by the members is \$0; and
3. The total amount of cash or property anticipated to be contributed by the members is \$119,079.56. This total includes amounts from items 1 and 2 above.

Dated this 5<sup>th</sup> day of September, 1995.


  
Robert A. Rossotti, Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 SEP 13 PM 3:53

**FILE NOW: Fee after May 1, will be \$263.75**

APPROVED

<b>LIMITED LIABILITY COMPANY</b> <b>ANNUAL REPORT</b> <b>1996</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
<b>FILING FEE</b> <b>\$ 238.75</b>		Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>	
<b>1. Name and Mailing Address of Limited Liability Company</b> <b>DOCUMENT #L95000000509</b>  CAPTIVA ISLAND, L.C. C/O ROBERT A. ROSETTI 160 BARNDOR HILLS ROAD SUFFIELD CT 06078		<b>1a. Principal Place of Business Address</b>  C/O ROBERT A. ROSETTI 160 BARNDOR HILLS ROAD SUFFIELD CT 06078	
<small>If above mailing address is incorrect in any way line through incorrect information and enter correction in Block 2a</small>			
<b>2. Principal Place of Business</b>  Suite, Apt #, etc.  City & State  Zip Country		<b>2a. Mailing Address</b>  Suite, Apt #, etc.  City & State  Zip Country	
<b>3. Date Organized or Qualified</b> 06/29/1995		<b>3a. State of Formation</b> FL	
<b>4. FEI Number</b> 06-142 3920		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>5. Date of Last Report</b>		<b>6. Certificate of Status Desired</b> <input type="checkbox"/> Additional Fee Required	
<b>7. Name and Address of Current Registered Agent</b>  C T CORPORATION, 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		<b>8. Name and Address of New Registered Agent</b>  Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt #, etc. City Zip Code FL	
<b>9. Pursuant to the provisions of Sections 608.410 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.</b>			
<b>SIGNATURE</b> _____ <small>(Registered Agent Accepting Appointment) (If 315 Registered Agent signature required when re-appointing)</small>		<b>DATE</b> _____	
<b>10. Title</b>	<b>Managing Members/Managers</b>	<b>Business Street Address</b>	<b>City, State and Zip Code</b>
MEM	ROSSETTI, ROBERT A	160 BARNDOR ROAD	SUFFIELD CT
MEM	ROSSETTI, JODY C	160 BARNDOR ROAD	SUFFIELD CT
<b>11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3) (k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.</b>			
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TITLE OF MANAGING MEMBER OR MANAGER</small>		3/3/96 (860) 763-5777 <small>Date and Phone #</small>	