

# L98000000257

Scott L. Johnson

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City/State/Zip

Phone #

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**NEW FILINGS**

Profit

NonProfit

Limited Liability

Domestication

**AMENDMENTS**

Amendment

Resignation of R.A., Officer/ Director

Change of Registered Agent

Dissolution/Withdrawal

Merger

Name  
Availability

Other

**OTHER FILINGS**

Annual Report

Fictitious Name

Name Reservation

Acknowledgement DCC

W. P. Verifier DCC

**REGISTRATION/  
QUALIFICATION**

Foreign

Limited Partnership

Reinstatement

Trademark

Other



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

February 17, 1998

SCOTT L. JOHNSON  
1452 GEORGETOWNE DRIVE  
SARASOTA, FL 34232

SUBJECT: GLOBAL CAPITAL MANAGEMENT, L.C.  
Ref. Number: W98000003547

We have received your document for GLOBAL CAPITAL MANAGEMENT, L.C. and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your limited liability company name is unavailable, pursuant to section 608.406(4), Florida Statutes. Since it is not distinguishable from the name of an existing entity. Please select a new name and make the substitution in all appropriate places. One or more words must be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 598A00009079

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Johnson Capital Management, L.C.

## ARTICLE II - Address:

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

1452 Georgetowne Drive  
Sarasota, Fl. 34232

## ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual

## ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Scott L. Johnson  
1452 Georgetowne Drive  
Sarasota, Fl. 34232

Stephen J. Johnson  
1895 Wood Hollow Circle  
Sarasota, Fl. 34235

## ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

N.A.

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**ARTICLE VI - Members Rights to Continue Business:**

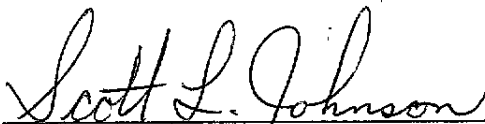
The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

In the event of a member's death, retirement, resignation, expulsion, bankruptcy, or dissolution, the remaining member(s) shall have the right to continue the business.

**ARTICLE VII - Affidavit of Membership and Contributions**

The undersigned member or authorized representative of a member of Johnson Capital Management, L.C. certifies:

- 1) the above named limited liability company has at least two members;
- 2) the total amount of cash contributed by the member(s) is \$ 5000.00;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ \_\_\_\_\_;  
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 5000.00.



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

Scott L. Johnson

Typed or printed name of signee

**Filing Fee: \$250.00 for Articles and Affidavit**

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**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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Johnson Capital  
Management, L.C.

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

Scott L. Johnson

NAME

1452 Georgetowne Drive

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

Sarasota

FL

34232

CITY, STATE AND 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.*

Scott L. Johnson

SIGNATURE

**Filing Fee: \$ 35 for Designation of Registered Agent**

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