L98000001731

Small Business Association

5000 Birch Street, Suite 6400 • Newport Beach, CA 92660 • Phone (949) 851-8196 • Fax (949) 851-1125

00789-01115-00524-00671
Fill out
Affidavit

August 11, 1998

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-08/24/98--01022--002
****285.00 ****285.00

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: **CUMMING/MCGILLIVRAY, LLC**

To Whom It May Concern:

Enclosed herewith is a check in the amount of $285 for the filing fee of the following documents:

1. Articles of Organization For Florida LLC ($35)
2. Certificate of Designation of Registered Agent/Registered Office ($250)

Please file the above-mentioned documents, and return the conformed copies of same to our office. A self-addressed envelope has been enclosed for your convenience.

If you have any questions or comments, please contact the undersigned.

Sincerely,

Tiffanie Ha

Enclosures: As noted above

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 SEP -4 AM 11:53

W98-19486

Name Availability	MH
Document Examiner	MH
Updater	MH
Updater Verifyer	MH
Acknowledgement	MH
P. Verifyer	MH

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 26, 1998

TIFFANIE HA
SMALL BUSINESS ASSOCIATION
5000 BIRCH STREET, SUITE 6400
NEWPORT BEACH, CA 92660

SUBJECT: CUMMING/MCGILLIVRAY, LLC
Ref. Number: W98000019486

We have received your document for CUMMING/MCGILLIVRAY, LLC and your check(s) totaling $285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

DONE

The affidavit must set forth the amount of the cash and a description and the agreed value of property other than cash contributed by the members, and the amount anticipated to be contributed by the members.

Please complete the affidavit.,

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) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 198A00044196

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Please return to our office conformed copies of same in the enclosed self-addressed envelope ——

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CUMMING/MCGILLIVRAY, LLC

ARTICLE II - Address:

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

4405 VINELAND ROAD, SUITE C-11
ORLANDO, FLORIDA 32811

ARTICLE III - Duration:

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

AUGUST 1, 2025

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:

James Finlay Cumming 36 Greenspring, Ste. 100, Dove Canyon, CA 92679
Iain McGillivray 9217 Pine Ridge Trail, Orlando, Florida 32819

☐ 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:

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:

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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:

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of CUMMING/MCGILLIVRAY, LLC certifies:

1) the above named limited liability company has at least one member;
2) the total amount of cash contributed by the member(s) is $ 20,000.00 ;

3) if any, the agreed value of property other than cash contributed by member(s) is $ 0 ;
(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 $ 20,000.00 .

X _____
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.)

JAMES FINLAY CUMMING
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: CUMMING/MCGILLIVRAY, LLC

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

IAIN MCGILLIVRAY
NAME

4405 VINELAND ROAD, SUITE C-11
Florida street address (P. O. Box NOT ACCEPTABLE)

ORLANDO, FL 32811
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.

SIGNATURE

Filing Fee: $ 35 for Designation of Registered Agent

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