

L98000002512

ATTORNEYS' TITLE

Requestor's Name

Address

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. (Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

93 NOV - 2 PM 3:25

☒ Walk in

☐ Pick up time

ASAP

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☒ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Availability	Noted
Document Examiner	Noted
Updater	Noted
Updater Verifier	Noted
Acknowledgement	Noted
v. P. Verifier	Noted

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

93 NOV - 2 PM 1:50

RECEIVED

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****346.25 ****346.25

Examiner's Initials

**ARTICLES OF ORGANIZATION OF
LILO OF COLLIER, L.L.C.**

The undersigned member hereby certifies that the members have associated themselves together for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. I further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

ARTICLE I

NAME

The name of the limited liability company shall be **LILO OF COLLIER, L.L.C.**, (the "Company").

ARTICLE II

ADDRESS OF PRINCIPAL PLACE OF BUSINESS

The mailing address and street address of the principal office of this Company shall be 3500 Prospect Avenue, Naples Florida 34104.

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ARTICLE III

REGISTERED AGENT

The name and address of the initial registered agent in the State of Florida is as follows: David P. Lobdell, 3500 Prospect Avenue, Naples, Florida 34104.

ARTICLE IV

DURATION

This Company shall exist until January 1, 2025, unless sooner dissolved in a manner provided by law, as herein set forth or as provided in the regulations adopted by the members.

ARTICLE V
MANAGEMENT

The Company will be managed by members in accordance with the Company's regulations. The name and address of the managing members is as follows:

<u>NAME</u>	<u>ADDRESS</u>
Lois Liuzzo, as Trustee of the John C. Liuzzo Revocable Trust dated November 11, 1990	Horsecreek Road Naples, Florida 34110

ARTICLE VI
RESTRICTIONS ON MEMBERSHIP

Members shall have the right to admit new members upon making such contributions as are set out in the Regulations, and otherwise complying with and agreeing to the terms and provisions of the Regulations.

ARTICLE VII
MEMBERS' RIGHTS TO CONTINUE BUSINESS

Upon the death, bankruptcy, or other dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the Company, the existence of the Company shall continue.

Executed by the undersigned member at Naples, Florida on the 30 day of OCTOBER, 1998.

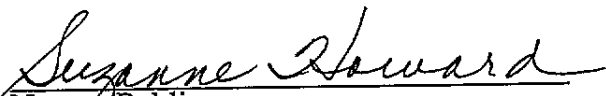

David P. Lobdell

State of Florida
County of Collier

This foregoing instrument was acknowledged before me this 30 day of OCT., 1998, by David P. Lobdell, who (☒) is personally known to me or who (☐) has produced _____ as identification.

NOTARY SEAL




Notary Public
Print name: _____
My commission expires: _____

**CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE AND
REGISTERED AGENT**

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

The name of the limited liability company is **LILO OF COLLIER, L.L.C.**

The name of the initial registered agent of the limited liability company is David P.
Lobdell, and the address of the office of the registered agent is 3500 Prospect Avenue,
Naples, Florida 34104.

REGISTERED AGENT ACCEPTANCE

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 that 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.



David P. Lobdell
Registered Agent

Date: OCT. 30, 1998

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FLORIDA STATE SECRETARY OF STATE

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS
LILO OF COLLIER, L.L.C.**

Before me, the undersigned authority, personally appeared **DAVID P. LOBDELL**, a Member of **LILO OF COLLIER, L.L.C.**, who, being first duly sworn deposes and says:

1. That the limited liability company known as **LILO OF COLLIER, L.L.C.** has at least one (1) member.
2. The total amount of real property contributed by members of **LILO OF COLLIER, L.L.C.** is **ONE HUNDRED THOUSAND DOLLARS (\$100,000.00)**.
3. The total amount of cash contributed by members of **LILO OF COLLIER, L.L.C.** is **ONE THOUSAND DOLLARS (\$1,000.00)**.
4. No other property or cash has been contributed by members.
5. The total of cash and property anticipated to be contributed by members is **THREE HUNDRED SIXTY THOUSAND DOLLARS (\$360,000.00)**. This amount is in addition to the amounts stated in Paragraphs 2 and 3 above.

Further, Affiant sayeth naught.

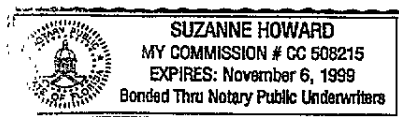


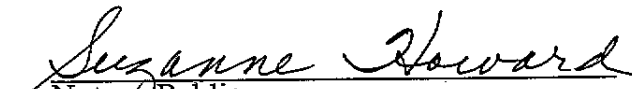
David P. Lobdell

State of Florida
County of Collier

This foregoing instrument was acknowledged before me this 30 day of OCTOBER, 1998, by David P. Lobdell, who (☒) is personally known to me or who (☐) has produced _____ as identification.

NOTARY SEAL





Notary Public Print name below:

My commission expires: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS