

Division of Corporations

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L99000007926

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 922-4003

From:

Kim Novak
Account Name : BARNETT, BOLT, KIRKWOOD & LONG
Account Number : 072731001155
Phone : (813) 253-2020
Fax Number : (813) 251-6711

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LIMITED LIABILITY COMPANY

Destination Properties LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

L99-7926

Name	<i>02-11-18</i>
Availability	<i>02</i>
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Destination Properties LLC

ARTICLE II - Address:

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

c/o Barnett, Bolt, Kirkwood & Long, 601 Bayshore Blvd., Suite 700, Tampa,
FL 33606, Attention: Robert S. Bolt

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

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

Robert S. Bolt

Name

601 Bayshore Blvd., Suite 700

Florida street address (P.O. Box NOT acceptable)
Tampa, FL 33606

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 a 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 608, F.S.

Robert S. Bolt

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Robert S. Bolt
Signature of a member or an authorized representative of a member.

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

Robert S. Bolt

Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)

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