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ACCOUNT NO. : 072100000032

REFERENCE : 501464 164228A

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 155.00

ORDER DATE : December 2, 1999

ORDER TIME : 2:29 PM

ORDER NO. : 501464-005

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CUSTOMER NO: 164228A

CUSTOMER: Steven P. Kushner, Esq
STEVEN P. KUSHNER, P.A.
STEVEN P. KUSHNER, P.A.
Suite 202
1375 Jackson Street
Fort Myers, FL 33901

DOMESTIC FILING

NAME: LI-INN SLEEPS BED & BREAKFAST,
L.C.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

EXAMINER'S INITIALS:

RECEIVED
99 DEC -2 PM 3:59
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
99 DEC -2 AM 9:32
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
12/3

**ARTICLES OF ORGANIZATION
OF
LI-INN SLEEPS BED & BREAKFAST, L.C.**

The undersigned subscribing Member to these Articles of Organization, hereby forms a Limited Liability Company under the laws of the State of Florida.

**ARTICLE I
NAME**

The name of this Limited Liability Company is: LI-INN SLEEPS BED & BREAKFAST, L.C.

**ARTICLE II
DURATION AND COMMENCEMENT OF EXISTENCE**

The existence of the Limited Liability Company shall commence upon the date of execution hereof. The Limited Liability Company shall exist in perpetuity unless sooner terminated as provided herein.

**ARTICLE III
PURPOSE**

This Limited Liability Company is organized for the purposes of transacting any and all lawful business authorized for Limited Liability Companies organized in Florida.

**ARTICLE IV
PRINCIPAL OFFICE AND MAILING ADDRESS**

The address of the Limited Liability Company's principal office is: 2135 McGregor Boulevard, Fort Myers, Florida 33901.

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TALLAHASSEE FLORIDA

ARTICLE V
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
AND REGISTERED OFFICE

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered agent and registered office, in the State of Florida.

1. The name of the Limited Liability Company is: LI-INN SLEEPS BED & BREAKFAST, L.C.

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

Steven P. Kushner, Esq.
Steven P. Kushner, P.A.
1375 Jackson Street, Suite 202
Fort Myers, Florida 33901

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TALLAHASSEE FLORIDA

Having been named as registered agent 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.


Steven P. Kushner

Date: 12/1/99

ARTICLE VI
CAPITAL

The minimum capital of the Limited Liability Company is Three Thousand Dollars (\$3,000.00) shall be paid in cash or other property. Additional contributions are not required, but may be made in accordance with the terms of the Regulations of Li-Inn Sleeps Bed & Breakfast, L.C.

ARTICLE VII
ADMISSION OF NEW MEMBERS

The admission of new Members shall be solely by majority vote (in interest) of the existing members.

ARTICLE VIII
DISSOLUTION - WINDING UP - LIQUIDATION

A. **Dissolution.** Subject to the terms of Subsection B below, the Limited Liability Company shall be dissolved on the happening of any of the following events:

1. Withdrawal, retirement, death, resignation, or bankruptcy of any Member.
2. Dissolution of any Member who is an entity.
3. Unanimous written agreement of the Members.

B. **Right to Continue Business.** Notwithstanding Subsection A above, the non-terminated Members ("Remaining Members") of the Limited Liability Company shall have the right to continue the business of the Limited Liability Company, despite the occurrence of any event which terminates the continued membership of a Member in the Limited Liability Company. The exercise of this right to continue shall be by written notice by any one or more of the Remaining Members (representing at least a majority of the interests in the Limited Liability Company) to the other Remaining Members within thirty (30) days of any event described in Subsection A of this Article.

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**ARTICLE IX
MANAGEMENT**

The Limited Liability Company shall be managed by a committee comprised of the Members or their representatives whose respective names and addresses are:

James Haas
2135 McGregor Boulevard
Fort Myers, FL 33901

IN WITNESS WHEREOF, the undersigned subscribing member has
executed these Articles of Organization of LI-INN SLEEPS BED & BREAKFAST, L.C., effective
this 23 day of November, 1999.

WITNESSES

Sydney Gibson
LYNDSEY GIBSON
Print/Type Name of Witness

Diane M. Mueller
DIANE M. MUELLER
Print/Type Name of Witness

James Haas
James Haas
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TALLAHASSEE FLORIDA

STATE OF ILLINOIS
COUNTY OF COOK

The foregoing Articles of Organization of LI-INN SLEEPS BED & BREAKFAST, L.C.,
was acknowledged before me this 23 day of November, 1999, by JAMES HAAS, who is
personally known ☒ to me or has produced _____ as identification
and ☒ [did] [did not] take an oath.

Diane M. Mueller
Notary Public
Name: _____
Serial No. _____

My Commission Expires:

