

MP0000009390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

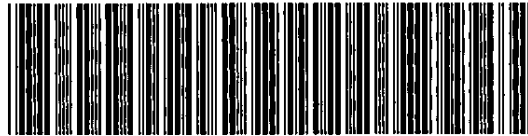
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TALLAHASSEE, FLORIDA

NOV 20 2015

S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sandcastle North #501 LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Curtis A. Brown
Name of Person

Sandcastle North #501 LLC
Firm/Company

1702 Anglers Court
Address

Safety Harbor, FL 34695
City/State and Zip Code

CURT. BROWN @ AMBASSADOR - ENTERPRISES. COM
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Curtis A. Brown at (260) 494-6164
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA**

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Sandcastle North #501 LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Indiana 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. November 13, 2015
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1702 Anglers Court
Safety Harbor, FL 34695
(Street Address of Principal Office)


6. Same
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Curtis A. Brown
Office Address: 1702 Anglers Court
Safety Harbor, Florida 34695
(City) (Zip code)

Registered agent's acceptance:

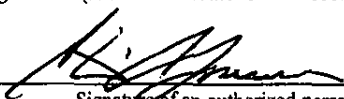
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Curtis A. Brown, Manager, 1702 Anglers Court, Safety Harbor, FL 34695

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)


Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Curtis A. Brown
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

**State of Indiana
Office of the Secretary of State**

**CERTIFICATE OF ORGANIZATION
of
SANDCASTLE NORTH #501 LLC**

I, Connie Lawson, Secretary of State of Indiana, hereby certify that Articles of Organization of the above Domestic Limited Liability Company (LLC) has been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Flexibility Act.

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NOW, THEREFORE, with this document I certify that said transaction will become effective Wednesday, November 11, 2015.

In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, November 12, 2015

Connie Lawson

CONNIE LAWSON,
SECRETARY OF STATE



RECEIVED 11/11/2015 08:56 AM

APPROVED AND FILED
CONNIE LAWSON
INDIANA SECRETARY OF STATE
11/12/2015 8:48 AM

ARTICLES OF ORGANIZATION

Formed pursuant to the provisions of the Indiana Business Flexibility Act.

ARTICLE I - NAME AND PRINCIPAL OFFICE

SANDCASTLE NORTH #501 LLC

1702 ANGLERS COURT, SAFETY HARBOR, FL 34695

ARTICLE II - REGISTERED OFFICE AND AGENT

ARLAN H. FRIESEN

2810 KNIGHTSBRIDGE PLACE, FORT WAYNE, IN 46815

The Signator represents that the registered agent named in the application has consented to the appointment of registered agent.

ARTICLE III - GENERAL INFORMATION

What is the latest date upon which the entity is to Perpetual
dissolve?:

Who will the entity be managed by?: Managers

Effective Date: 11/11/2015

Electronic Signature: CURTIS A. BROWN

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