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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078 Phone : (407)843-8880 Fax Number : (407)244-5690

Enter the email address for this business entity to be used for future: annual report mailings. Enter only one email address please. JEFFREY.BANKOWITZ@GRAY-ROBINSON.COM

Email Address:

FLORIDA LIMITED LIABILITY CO. CLERMONT LAND VENTURES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 773 3)))

ARTICLE I - Name:

The name of the Limited Liability Company is: CLERMONT LAND VENTURES, LLC

ARTICLE II - Address:

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

1875 S. Orlando Avenue Maitland, Florida 32751

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

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

Jeffrey T. Bankowitz, Esq.

Name

GrayRobinson, P.A., 301 E. Pine Street, Suite 1400 Florida street address (P.O. Box NOT acceptable)

> Orlando, Florida 32801 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 posttlon as registered agent as provided for in Chapter 605, F.S.

Registered Agent & Signature: Jeffrey T. Bankowitz, Esq.

Article IV - Officer:

The name and address of the officer who is to serve the Company until his successor is duly elected and qualified in accordance with the Company's Operating Agreement is as follows:

Title

Name and Address

President

Thomas A. Dixon 1300 Country Lane Orlando, Florida 32804

Article V - Management:

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

Manager

First Team Commercial, LLC 1875 S. Orlando Avenue Maitland, Florida 32751

Jeffrey T. Bankowitz, Esq., Authorized Representative Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Jeffrey T. Bankowitz, Esq. Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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