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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

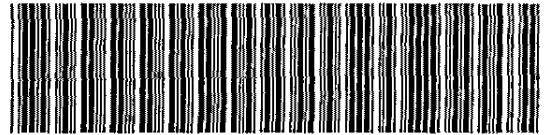
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04 SEP 20 PM 4:04

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Blue Sky Realty
1133 Del Prado Blvd.
Suite #5
Cape Coral, FL 33990

September 10, 2004

To whom it may concern:

Enclosed is our completed application for forming a Florida Limited Liability Company along with a check for the appropriate filing fees.

If you have any questions, please contact me at the following:

Donna Gross
1133 Del Prado Blvd.
Suite #5
Cape Coral, FL 33990
Phone: (239) 573-1239
FAX: (239) 573-1082

Sincerely,

A handwritten signature in cursive script, appearing to read "Donna Gross".

Donna Gross
Blue Sky Realty
Licensed Real Estate Broker
Lic #BK3003710

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Blue Sky Realty, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donna K. Gross
(Name of Person)

Blue Sky Realty
(Firm/Company)

1133 Del Prado Blvd., #5
(Address)

Cape Coral FL 33990
(City/State and Zip Code)

For further information concerning this matter, please call:

Donna K. Gross at (239) 573-1239
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Blue Sky Realty, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1133 Del Prado Blvd

Same

Ste #5

Cape Coral, FL 33990

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

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

Donna K. Gross
Name

1133 Del Prado Blvd, Ste. #5
Florida street address (P.O. Box **NOT** acceptable)

Cape Coral FLORIDA 33990
City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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 position as registered agent as provided for in Chapter 608, Florida Statutes..

Donna K. Gross

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Donna K. Gross
1133 Del Prado Blvd, #5
Cape Coral, FL 33990

~~MGRM~~

~~Donna K. Gross~~
~~1133 Del Prado Blvd, #5~~
~~Cape Coral, FL 33990~~

MGRM

Allen F. Gross
1133 Del Prado Blvd, #5
Cape Coral, FL 33990

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Donna K. Gross

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.)

Donna K. Gross

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)