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(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
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November 6, 2008

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5	<b>ERVICES</b>	CORPORATION NAME (S) AND DOCUMENT NUMBER (S)
	T. R	an Family II, LLC
		EFFECTIVE DATE 11 7 100
	Filing Evidence  □ Plain/Confirmation Co	Type of Document
	☑ Certified Copy	□ Certificate of Good Standing
		□ Articles Only
		☐ All Charter Documents to Include
	Retrieval Request	Articles & Amendments
	□ Photocopy	☐ Fictitious Name Certificate
	☐ Certified Copy	□ Other
	NEW FILINGS	AMENDMENTS
	Profit	Amendment
	Non Profit	Resignation of RA Officer/Director
	1	

	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

 AMENDMENTS
Amendment
 Resignation of RA Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION
Foreign
Limited Liability
Reinstatement
Trademark .
Other

EFFECTIVE DATE\_

## ARTICLES OF ORGANIZATION FOR T. RYAN FAMILY II, LLC

## FLORIDA LIMITED LIABILITY COMPANY



The name of the Limited Liability Company is:

T. RYAN FAMILY II, LLC



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

PRINCIPAL OFFICE ADDRESS: 1905 8th Street South Naples, Florida 34102

MAILING ADDRESS: 1905 8th Street South Naples, Florida 34102

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED **AGENT'S SIGNATURE:** The Name and the Florida street address of the registered agent are:

Charles M. Kelly, Jr.

2390 Tamiami Trail North, Suite 204, Naples, Florida 34103

Florida street address (P.O. Box NOT acceptable)

Naples, Florida 34103

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 position as registered agent as provided for in Chapter 608, F.S.

## ARTICLE IV - MANAGER(S) OF MANAGING MEMBER(S):

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

TITLE:

NAME AND ADDRESS:

"MGR" - Manager

"MGRM" = Managing Member

THOMAS A. RYAN MANAGER

1905 8th Street South, Naples, Florida 34102

ARTICLE V - EFFECTIVE DATE

The effective date of T. RYAN FAMILY II, LLC is November 5, 2008.

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.)

Charles M. Kelly, Jr

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)