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EFFECTIVE DATE 9/1/2012

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<i>t.</i> • •		COVER LI		1		
	Registration Section Division of Corporations		EFFE	CTIVE DATE 9 1 2012		
SUBJEC		ame of Limited Lia	ge L.	L.G.		
The enclo	osed Articles of Organization a	nd fee(s) are submit	ed for filing.	to State		
Please re	turn all correspondence concer	ning this matter to th	e following:			
<u>5</u>	533 Orange LL	C Mana	rk or Sho	iron Strickland		
	533 Orange L.L.C.					
Firm/Company/) 164 Roselle Court						
Port Charlotte, FL 33952						
_	Shara @ p	ertorman	and Zip Code  e annual report notifi	cation)		
For further	arm Strickle Name of Person	1	678 4r	-3668 - Cell 13-0166 ime Telephone Number		
Enclosed	l is a check for the following	; amount:				
\$125.00 F	iling Fee \$130.00 Filir Certificate o	of Status Ce	55.00 Filing Fee ortified Copy ditional copy is enclosed.	Certificate of Status &		
	Mailing Add Registration S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7	Street/Courier A Registration Section Division of Corp Clifton Building 2661 Executive of Tallahassee, FL	ion orations Center Circle		

EFFECTIVE DATE 9/1/20/2

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPAI

## **ARTICLE I - Name:**

The name of the Limited Liability Company is:

533 Orange LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

## **ARTICLE II - Address:**

Principal Office Address:

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

**Mailing Address:** 

164 hoselle Court	Yort Charlotte, FL 33952
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its ov business entity with an active Florida registration.)	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another
The name and the Florida street address of the street address of t	of the registered agent are:  LLC Markor Sharon Strickland  Name
164 Ros Florida s	elle Court treet address (P.O. Box NOT acceptable)
Yort Cha	treet address (P.O. Box NOT acceptable)  Tothe FL 33952  City State and Zin

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.

Registered Agent's Signature (REQUIRED

(CONTINUED)

The name and address of each Mana	ager or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Sharon Strictland  Jo4 Proselle Court  Joseph El 33957
MGRM	Mark Strictland Plat Roselle Court Port Charlotte, FL 33952
<del></del>	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.)	ne date of filing: 9-1-2012 (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Shown Signature of a mem	ber or an authorized representative of a member.
(In accordance with section 6 constitutes an affirmation und I am aware that any false info	08.408(3), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true, or mation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.)

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

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)

Typed or printed name of signee