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(Address)
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(City/State/Zip/Phone #)
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13 JAN 25 AM II: 08 SECRETARY OF STATE, TALLAHASSEE, FLORIDA

B. BOSTICK
'JAN 2 8 2013
EXAMINER

COVER LETTER

TO: Registration Section **Division of Corporations** Plymouth Investments LLC Name of Limited Liability Company Monroe Apperties LCC was resected The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Andon Calhoun Name of Person Firm/Company 1007 Featherstone Circle Address Ocoee, FL 34761 City/State and Zip Code andonlee@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Andon Calhoun Name of Person Enclosed is a check for the following amount: □\$130.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing Fee, **□\$125.00** Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) Check 905 Data 1-11-13 (additional copy is enclosed) danosited 1-14-13 **Mailing Address** Street/Courier Address Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle

Monroe Properties LCC
Which was rejected brown
alredy in use.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	Limited Liability Company	is:			
Plymouth Investmen					
(Must end with the words "Limited I	iability Company, "L.L.C.," or "LLC.")			
ARTICLE II -	Address:				
		e principal office of the Limited L	iability C	ompa	ny is:
		•	•	•	•
Principal Office	Address:	Mailing Address:			
242 C DW 404		040 C. Dilland Ct.			
310 S. Dillard St		310 S. Dillard St. Suite 200			
Suite 200	4707	Winter Garden, FL 34787			
Winter Garden, FL 34787		Willer Galden, 1 E 34707			
	an active Florida registration.) e Florida street address of t Andon Calhoun		ALLAHASSE	13 JAN 25	
	N	ame	įπ ₄ .		m
	1007 Featherstone Circle			=	\circ
	Florida stree	t address (P.O. Box NOT acceptable)	골은	AM 11: 08	
	Ocoee	_{FL} 34761	Þ	-	
	City	y, State, and Zip			
					• •
liability com registered age all statutes re	pany at the place designated nt and agree to act in this ca lating to the proper and com	I to accept service of process for the in this certificate, I hereby accept spacity. I further agree to comply suplete performance of my duties, and sergistered agent as provided for	the appoi with the pr nd I am far	ntmen ovisio niliar	nt as ons of with

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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

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

"MGR" = Man "MGRM" = M	anaging Member		
MGR		Andon Calhoun	
		1007 Featherstone Circle	
		Ocoee, FL 34761	
			
		P. C.	
	,	HAS:	C 2 N
		(L)	
		FL	上の経過
		<u> </u>	
(Use attachmei	at if necessary)		
ffective date is	e date, if other than th	ne date of filing: (OPT	IONA
LE V: Effective frective date is or 90 days aft	e date, if other than the listed, the date mus	ne date of filing: (OPT	TIONA
LE V: Effective frective date is or 90 days aft	e date, if other than the listed, the date muster the date of filing.)	ne date of filing: (OPT st be specific and cannot be more than five b	TIONA
LE V: Effective frective date is or 90 days aft	te date, if other than the listed, the date muster the date of filing.) SIGNATURE:	ne date of filing: (OPT st be specific and cannot be more than five the specific and cannot be more than the specific and cannot be more than the specific and cannot be specific and cannot b	TIONA
LE V: Effective frective date is or 90 days aft REQUIRED S	re date, if other than the listed, the date muster the date of filing.) SIGNATURE: Signature of a member of a me	st be specific and cannot be more than five b	FION A Dusine
LE V: Effective frective date is or 90 days aft REQUIRED S	re date, if other than the listed, the date muster the date of filing.) SIGNATURE: Signature of a member of a me	per or an authorized representative of a member. 18.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are transition submitted in a document to the Department of Sta	FION A pusine

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)



January 15, 2013

ANDON CALHOUN 310 S. DILLARD STREET SUITE 200 WINTER GARDEN, FL 34787

SUBJECT: MONROE PROPERTIES LLC

Ref. Number: W13000002960

We have received your document for MONROE PROPERTIES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L05000003471,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned:

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 413A00001106