

L13000174866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

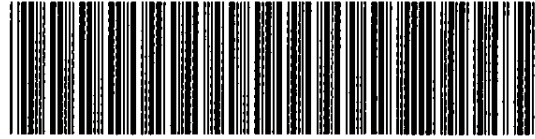
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000253549290

12/18/13--01016--001 **125.00

Effective Date 12/10/13

FILED
2013 DEC 18 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 19 2013
T. HAMPTON

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: F X Scanlan, 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:

Frank Scanlan

Name of Person

Firm/Company

4301 NW 107 Ave

Address

Coral Springs, FL 33065

City/State and Zip Code

fxscanlan@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank Scanlan

Name of Person

at (**954**) **4640955**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Francis X Scanlan

4301 N.W. 107 Avenue

Phone 954 834 3802

Coral Springs, FL 33065

December 16 , 2013

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Articles of Organization

Enclosed you will find the Articles of Organization for F X Scanlan, LLC and check #3669 for \$125 for the filing fee

Sincerely

A handwritten signature in black ink, appearing to read 'F X Scanlan', written in a cursive style.

Francis X Scanlan

Effective Date 12/10/13

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

F X SCANLAN, LLC

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

4301 NW 107 Ave

4301 NW 107 Ave

Coral Springs, FL 33065

Coral Springs, FL 33065

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Francis X Scanlan

Name

4301 NW 107 Ave

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

Coral Springs, FL 33065

FL

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.

[Handwritten Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2013 DEC 18 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MGRM _____

Francis X Scanlan _____

4301 NW 107 Ave _____

Coral Springs, FL 33065 _____

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 12/16/2013. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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. 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.)

Francis X Scanlan _____

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)

FILED
2013 DEC 18 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA