## 116000026015

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SECHEFARY OF STATE
DIVISION OF CORPORATIONS

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S. PRATHER

## **COVER LETTER**

	legistration Section Division of Corporations	
SUBJECT:	STRICKLAND HOMES LLC	
SOBOLECT.	Name of Limited Liability Company	
The enclose	sed Articles of Organization and fee(s) are submitted for filing.	
Please retur	ım all correspondence concerning this matter to the following:	
	GREG STRICKLAND	
	Name of Person	
	STRICKLAND HOMES LLC	
	Firm/Company	
	7125 FRUITVILLE ROAD #1501	
	Address	
	SARASOTA, FLORIDA 34240	
s	City/State and Zip Code stricklandhomesllcfl@gmail.com	
_	E-mail address: (to be used for future annual report notification)	
For further in	nformation concerning this matter, please call:	
1	GREG STRICKLAND 972 795-2845	
<del>-</del>	Name of Person Area Code Daytime Telephone Number	
Enclosed is	s a check for the following amount:	
<b>5</b> 125.00 Fil	iling Fee \$130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is	tatus &
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
STRICKLAND HOMES LLC.		givis
(Must end with the words "Limited Liability Co	ompany, "L.L.C.," or "LLC.")	JAN SERVICE
ARTICLE II - Address: The mailing address and street address of the principal office of the L	Limited Liability Company is:	4 8 P
Principal Office Address:	Mailing Address:	三泉
7125 FRUITVILLE ROAD #1501 SARASOTA, FLORIDA 34240	7125 FRUITVILLE ROAD #1501 SARASOTA, FLORIDA 34240	- Long

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:

**ARTICLE 1 - Name:** 

GREG STRICKLA	ND	
	Name	
7125 FRUITVILLE	ROAD #1501	
Florida street addres	ss (P.O. Box NOT acce	ptable)
SARASOTA	FLORIDA	34240
City	State	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 605, F.S..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

"AMBR" = Authorized Member	Name and Address:
TETISIC TEGICITES OF ITICITIES	
"MGR" = Manager	
MGR	GREG STRICKLAND
	7125 FRUITVILLE ROAD #1501
	SARASOTA, FLORIDA 34240
AMBR	SUE STRICKLAND
	7125 FRUITVILLE ROAD #1501
	SARASOTA, FLORIDA 34240
<del>de de con</del>	
	·
<del></del>	
(Use attachment if necessary)	
•	f filing: (OPTIONAL)
TICLE V: Effective date, if other than the date of	f filing: (OPTIONAL)  ific and cannot be more than five business days prior to or 90 days afte
TICLE V: Effective date, if other than the date of an effective date is listed, the date must be specidate of filing.)	ific and cannot be more than five business days prior to or 90 days afte
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Filing Fees:

Typed or printed name of signee

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

**GREG STRICKLAND** 

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

16 JAN 28 PH 1: 41