

# L18000249012

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

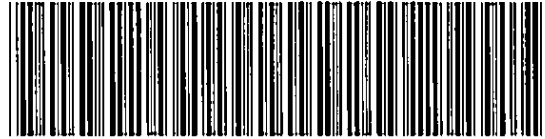
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ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED

**Candace Bury  
919 Crescent Lake, LLC  
919 Crescent Lake Dr. Lower  
St. Petersburg, FL 33701**

September 1, 2018

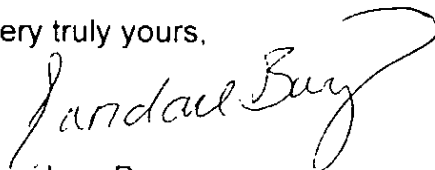
Secretary of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: 919 Crescent Lake, LLC

Dear Sir or Madam:

Enclosed please find the original and one copy of Articles of Organization, together with a check in the amount of \$155.00. This represents the cost of the Filing Fees, Certified Copy of Articles of Organization and Fee for Registered Agent Designation for the above-named organization.

Very truly yours,



Candace Bury  
919 Crescent Lake, LLC

Enclosures

check stapled here

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## **ARTICLES OF ORGANIZATION**

of

### **919 CRESCENT LAKE, LLC**

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, hereby forms a limited liability company under the laws of the State of Florida.

#### **ARTICLE I - ORGANIZATION NAME**

The name of the organization is 919 Crescent Lake, LLC.

#### **ARTICLE II - DURATION**

The limited liability company shall exist perpetually unless dissolved according to Florida law.

#### **ARTICLE III - PURPOSE**

The limited liability company is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida, and to be afforded all the protections of the laws of the State of Florida afforded to limited liability companies.

#### **ARTICLE IV – ORGANIZATION OFFICE**

The organization's principal office address shall be as follows:

919 Crescent Lake Dr. Lower  
St. Petersburg, FL 33701

The organization's mailing address shall be as follows:

919 Crescent Lake Dr. Lower  
St. Petersburg, FL 33701

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**ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT & REGISTERED  
AGENT'S SIGNATURE**

The name and the Florida street address of the Initial Registered Office and Agent of this Organization is:

Candace Bury  
919 Crescent Lake Dr. Lower  
St. Petersburg, FL 33701

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.

  
\_\_\_\_\_  
Candace Bury, Registered Agent

**ARTICLE VI - MANAGERS**

This organization shall have two (2) managers initially. The number of managers may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial managers of the organization are as follows:

Joah Bury  
919 Crescent Lake Dr. Lower  
St. Petersburg, FL 33701

Candace Bury  
919 Crescent Lake Dr. Lower  
St. Petersburg, FL 33701

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NOTARY PUBLIC  
J. J. JONES

## ARTICLE VII - SIGNER

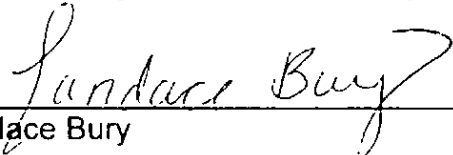
The name and address of the person signing these Articles of Organization is as follows:

Candace Bury  
919 Crescent Lake Dr. Lower  
St. Petersburg, FL 33701

## ARTICLE VIII – MANAGEMENT

The Limited Liability Company is to be managed by one or more managers who are not members and is, therefore, a manager – managed company.

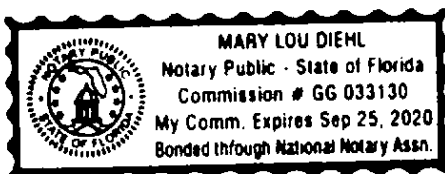
IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Organization this 1<sup>st</sup> day of September, 2018

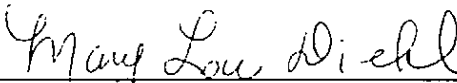
  
Candace Bury

STATE OF FLORIDA  
COUNTY OF PINELLAS

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Candace Bury, known to me to be the person who executed the foregoing Articles of Organization, and who acknowledged before me that she executed these Articles of Organization.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 1<sup>st</sup> day of September, 2018



  
Notary Public, State of Florida at Large  
My Commission Expires: