

LO800084513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

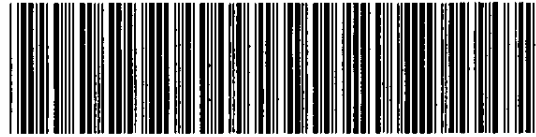
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500135277475

09/04/08--01027--005 **155.00

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 SEP -4 AM 10:23

D. BRUCE

SEP 05 2008

EXAMINER

The Allison Firm

A Professional Association
P.O. Box 2129
Key West, Florida 33045

John R. Allison, III, Esq.

Florida Bar No. 135772

September 3, 2008

Via FedEx

Secretary of State
State of Florida
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

FILED
08 SEP -14 AM 10:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Articles of Organization for 35 Parrot Key, LLC.

Dear Sir/Madam:

I am enclosing are two duplicate originals of executed Articles of Organization for 35 Parrot Key LLC, and my check in the amount of \$155.00 to cover the filing fee, registered agent designation and certified copy.

A self-addressed return envelope is provided herewith. Thank you for your prompt attention to this matter.

Sincerely,

JOHN R. ALLISON, III

Enclosures as stated

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

The name of the limited liability company is:

35 PARROT KEY, LLC.

ARTICLE II – Address:

The mailing address and street address of the limited liability company is:

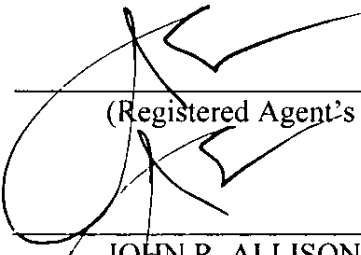
1010 Kennedy Drive #302
Key West, Florida 33040.

ARTICLE III – Registered Agent, Registered Office, and Registered Agent's Signature:

JOHN R. ALLISON, III
1010 Kennedy Drive #302
Key West, Florida 33040.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, 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 Florida Statutes.

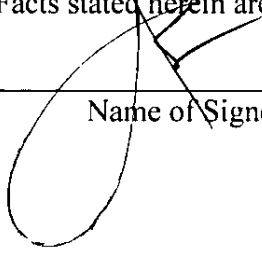
Dated: September 2, 2008.



(Registered Agent's Signature)

JOHN R. ALLISON, III, as an authorized
representative of a member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the Facts stated herein are true.)



Name of Signee: John R. Allison, III

FILED
03 SEP -4 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA