# L12000053919

(Re	questor's Name	)
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
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D. BRUCE
APR 2 0 2012
EXAMINER

# **COVER LETTER**

	on Section f Corporations		
SUBJECT: 270	9 LLC		
		Liability Company	
The enclosed Article	es of Organization and fee(s) are sub	omitted for filing.	
Please return all cor	respondence concerning this matter	to the following:	
	Jan	nes Falls	
	Na	ame of Person	
	27	09 LLC	
	Fi	irm/Company	
	1857 Ch	atham Village Dr.	
		Address	· · · · · · · · · · · · · · · · · · ·
	Fleming	Island, Fl 32003	
		tate and Zip Code	
	twenty7	oh9@gmail.com	SEC ALL
	E-mail address: (to be used for	future annual report notification)	AAC 20
For further informat	tion concerning this matter, please ca	dt:	20 ASS
James Falls	a	874-0397	
Na	ame of Person	Area Code & Daytime Tele	phone Number 9 2 5
Enclosed is a chec	k for the following amount:		A
5125.00 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 C	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLI	L	- N	a	me	;
The manne	-c	د ما د	T	:	:

The name of the Limited Liability Company is:

2709 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:	
2709 LLC 1857 Chatham Village Dr.	James Falls 1857 Chatham Village Dr.	
Fleming Island, FL 32003	Fleming Island, FL 32003	
Middleburg FL	registered agent are:	ire: ther ther ther ther ther ther ther ther

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

MA CODIL A C	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	James Falls
	1857 Chatham Village Dr.
	Fleming Island, FL 32003
MGRM	Mikhail Davis
	1608 Sedgwick Dr.
	Middleburg, FL 32068
MGRM	John-Wesley Snipes
	15516 Kensington Tr.
	Clermon, FL 34711
MODU	Olliman Nicaria
MGRM	Olliver Neale 2829 North Miller Dr.
	Palm Beach Gardens, FL 33410
fective date, if other than the frective date is listed, the date must days after the date of filing.)	be specific and cannot be more than five business days pri
REQUIRED SIGNATURE:	
Signature of a memory (In accordance with section 60 constitutes an affirmation und I am aware that any false info constitutes a third degree felo	ber or an authorized representative of a member 2008.408(3), Florida Statutes, the execution of this dosorment der the penalties of perjury that the facts stated hereinfare true. The permation submitted in a document to the Department of State 2009 as provided for in s.817.155, F.S.)  James Falls
Signature of a memory (In accordance with section 60 constitutes an affirmation und I am aware that any false info constitutes a third degree felo	08.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated hereiffare true. The permation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)

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)