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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	y/State/Zip/Phon	e #)
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(Do	cument Number)	
Certified Copies	_ Certificate	s of Status
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08/01/16--01006--003 **125.00

SECRETARY OF STATE

COVER LETTER

10: ,	Division of Corporations	₹
SUBJE	1115 Delaware Ave. LLC	
SODJE	Name of I	Limited Liability Company
The enc	losed Articles of Organization and fee(s)	are submitted for filing.
Please r	eturn all correspondence concerning this	matter to the following:
	Catherine Broderick	
		Name of Person
	1115 Delaware Ave. LLC	
		Firm/Company
	1121 Delaware Avenue	
		Address
	Fort Pierce, Florida 34950	
	ktridentproperty@bellsouth,net	City/State and Zip Code
	E-mail address: (to be us	sed for future annual report notification)
For furth	er information concerning this matter, ple	ease call:
	Catherine Broderick	561 702-7915
	Name of Person	Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:	
\$125.0	0 Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Sertified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liabilit	y Company is:				
1115 Delaware Ave.					
(Must end	with the words "Limited	Liability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street ad	ddress of the principal o	ffice of the Limited I	iability Company is:		
Principa	al Office Address:		Mailing Address:		
1221 Delaware Aver			Delaware Avenue		
Fort Pierce, Florida 3	4950	Fort P	Pierce, Florida 34950		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street	cannot serve as its own active Florida registration	Registered Agent. Y		SECRETAR)	2016 AUG - 1
	Catherine Broderick			20 C	A
		Name		FEG	
	1221 Delaware Aven	nue	_		8: 3 ¹
	Florida street addres	s (P.O. Box NOT ac	ceptable)	7	-
	Fort Pierce	Florida	34950		
	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

	Title: "AMBR" = Authorized	Member	Name and Address:
	"MGR" = Manager MGR		Catherine Broderick
	MOK		1221 Delaware Avenue
			Fort Pierce, Florida 34950
	MGR		Michael Broderick
		•	1221 Delaware Avenue
			Fort Pierce, Florida 34950
			184
			· · · · · · · · · · · · · · · · · · ·
	(Use attachment if nece	ssary)	
ГІСІ	LEV: Effective date, if o	other than the date of filing	g: (OPTIONAL)
in ef date <u>te:</u> l	LE V: Effective date, if of fective date is listed, the of filing.) If the date inserted in this	other than the date of filing date must be specific and block does not meet the	nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be lis
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n ef date te: l docu	LE V: Effective date, if of fective date is listed, the of filing.) If the date inserted in this iment's effective date or LE VI: Other provisions, REQUIRED SIGNAT This do	sther than the date of filing date must be specific and block does not meet the the Department of State if any. SURE: Guarante of a member of coument is executed in a	applicable statutory filing requirements, this date will not be list's records.

Filing Fees:

Typed or printed name of signee

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

as