

L01000022719

Sandra A. Murray

Requester's Name

16174 Forest Oaks Dr

Address

Ft Myers, FL 33908-5502

City/State/Zip

Phone #

600004735566--8

-12/21/01--01025--015

\*\*\*160.00 \*\*\*160.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

Walk in

Pick up time \_\_\_\_\_

Certified Copy

Mail out

Will wait

Photocopy

Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

01 DEC 21 PM 3:59  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Examiner's Initials

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

John V. & Sandra A. Murray, LLC

**ARTICLE 11 - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

16174 Forest Oaks Dr., Fort Myers, Florida, 33908

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

John V. Murray

Name

16174 Forest Oaks Dr.

Florida street address (P.O. Box NOT acceptable)

Fort Myers, Florida 33908

City, State, and 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 608, F.S.*

  
Registered Agent's Signature

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TALLAHASSEE, FLORIDA

**Article IV - Management (Check box if applicable.)**

The Limited Liability Company is to be managed by one manager or more managers therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

  
Signature of a member or an authorized representative of a member.

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

John V. Murray

Typed or printed name of signee

Filing Fees:  
\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)