

LO2000014397

FAX COVER SHEET

400005726554--4
-06/07/02--01075--005
***\$125.00 ***\$125.00

SEND TO		FROM	
Company name Division of Corporations		Donna Skinner Edwards	
Attention Registration Section		Date 6/5/02	
Office location P.O. box 6327		Office location 2365 Pineapple Ave, Melbourne	
Fax number Tallahassee FL 32314		Phone number 321-720-1030	

FL
32935

☒ Urgent ☐ Reply ASAP ☐ Please comment ☐ Please review ☐ For your information

Total pages, including cover: _____

COMMENTS

Enclosed:

1. Request for LLC registration

2. Check \$125⁰⁰

FILED
02 JUN -7 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Edwards Enterprise, L.L.C.

ARTICLE II - Address:

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

2365 Pineapple Ave Melbourne, FL 32935

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

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

Donna J. Skinner-Edwards
Name

2365 Pineapple Ave, Melbourne
Florida street address (P.O. Box NOT acceptable)

FL 32935
City, State, and Zip

FILED
02 JUN -7 AM 9:10
CLERK OF STATE
TALLAHASSEE, FLORIDA

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.

Donna J. Skinner-Edwards
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

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

Donna J. Skinner-Edwards
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.)

DONNA J. SKINNER-EDWARDS
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)