## L02000033821

MICHEL BOULDS (Requestor's Name)
(risquisses s riams)
7/56 SHADY GROVE WAY
TALLAWA SSEE
( /==/,==5)
<i>FL</i> . 323/7 (City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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DIVISION OF CORPORATION 02 DEC 17 AH ID 25

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

•		
ARTICLE I - Name: The name of the Limited Liability Company is:		
NORTHSIDE VILLAS LLE		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Co	ompan	v is:
2711 ALLEN ROAD	<b></b>	,
TALLAHASSEE, FL 32303		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatu	ire:	
intiloni in a regiserior regissioned outros, as regisses to regisses to regisses		olvi S
The name and the Florida street address of the registered agent are:	D2 DEC 17	SIDIE
MICHEL A. BOULOS Name	_	
Name	AN 10: 30	300
7156 SHADY GROVE WAY	<b>=</b>	35°.
Florida street address (P.O. Box NOT acceptable)		
TALLAHASSEE FL 323/2 City, State, and Zip	30	35
Having been named as registered agent and to accept service of process for the above stationary company at the place designated in this certificate, I hereby accept the appointm registered agent and agree to act in this capacity. I further agree to comply with the prostatutes relating to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 608, Registered Agent's Signature	ent as visions with a	of all
Article IV - Management (Check box if applicable.)  The Limited Liability Company is to be managed by one manager or more manage therefore, a manager - managed company.	ers and	lis,
(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		

MiCHELA. BOULD
Typed or printed name of signee

that the facts stated herein are true.)

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent

BOULDS

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)