

L03000000360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

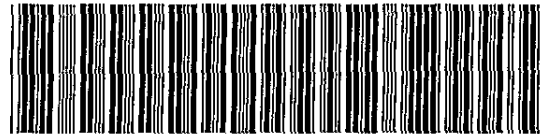
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF COURT

AL

Cathy Richie
129 N Federal Highway #200
Lake Worth, FL 33460
Telephone 561-586-2070

December 26, 2002

Registration Section
Division Of Corporations
409 E. Gains St.
Tallahassee, FL 32399

FL
03 JAN -3
RECEIVED
TALLAHASSEE, FL

Sirs,

I enclose the Articles of Organization of De-Ca Management LLC, for filing.

I also enclose a check for \$155 to cover the following:

Filing Fee	\$100	==
Designation of Registered Agent	\$ 25	==
Certified Copy	<u>\$ 35</u>	==
Total	<u>\$155</u>	==

Sincerely,

Cathy Richie
Cathy Richie

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

De-Ca Management LLC

ARTICLE II - Address:

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

129 N Federal Highway #200, Lake Worth, FL 33460

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

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

Cathy Richie

Name

129 N Federal Highway #200

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

Lake Worth

FL 33460

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.

Cathy Richie

Registered Agent's Signature

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

Cathy Richie

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.)

Cathy Richie

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)

FILED

03 JAN -3 PM 12:

CLERK OF STATE
TALLAHASSEE, FLORIDA