## 103000000577

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1/6 PLUC

Office Use Only



800009708998

HLM

01/06/03--01024--003 . \*\*125.00

03 JAN -6 PH 2: 11

## Transmittal Letter

Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Subject: Capital Development, LLC

Enclosed is an original and (1) copy

Filing fee for articles of organization of Florida Limited Liability Company:

\$100.00 Filing fee for Articles of Organization \$ 25.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$5.00 if a certificate of status is needed. The fee for a certified copy is \$30.00. Please send one check for the total amount made payable to the Florida Department of State.

From:

Lawrence Harbolt

170 Georgia Ave., P.O. Box 739

Crystal Beach, Fl. 34681

(727) 771 - 6779 Daytime phone

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Capital Development, LLC.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
170 Georgia Ave., P.O. Box 739 Crystal Beach, Fl. 34681
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Lawrence Harbolt Name
170 Georgia Aux. P.O. Box 7.39  Florida street address (P.O. Box NOT acceptable)
Crystal Beach Fl 34681 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
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 paust be added if an effective date is requested)
Samuel Salet
Signature of a member of 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.)
Lawrence Harbolt  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)