

L03000004436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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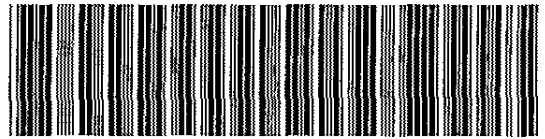
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Berry & Greusel
Attorneys at Law

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Jamie B. Greusel
Licensed in FL and NJ
Russell S. Sharbaugh, Jr.
Licensed in FL and NJ

CF -125

January 13, 2003

State of Florida
Department of State
Corporate Division
P.O. Box 6327
Tallahassee, FL 32314

Re: City Storage, LLC

Gentlemen/Ladies:

Enclosed please find:

1. Articles of Dissolution for City Storage, Inc.
2. Articles of Organization for City Storage, LLC
3. A check in the amount of \$160.00 representing the \$125.00 filing fee for the LLC and \$35.00 fee for the Dissolution.

Kindly file the originals.

Sincerely,

Jamie B. Greusel

JBG/mh
Enclosure

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

City Storage, LLC

ARTICLE II - Address:

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

1104 North Collier Blvd., Marco Island, Florida 34145

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

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

Jamie B. Greusel

Name

1104 N. Collier Blvd.

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

Marco Island, FL 34145

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

(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.)

Daniel J. Dufault

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)

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