

L030000006388

Michael L. Morrison  
18929 St. Laurent Drive  
Lutz, FL 33558

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*2/21/03*

Office Use Only



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FILED  
FEB 20 2003  
FBI - TAMPA

03 FEB 20 AM 9:15

2/14/2003

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Dear Sir/Madam,

Included are the Articles of Organization for MLM Realty, LLC. Along with the articles is the payment for Filing Fee:

	\$100.00
Designation of Registered Agent:	25.00
Certified Copy:	30.00
Certificate of Status	<u>5.00</u>
Total payment of:	\$160.00

Thank You,  
Michael L. Morrison

**FILED**  
03 FEB 20 AM 9:15  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:  
MLM Realty, LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:  
18929 St. Laurent Drive, Lutz FL 33558

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

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

Michael L. Morrison

Name

18929 St. Laurent Drive

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

Lutz,

FL 33558

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.)

Michael L. Morrison

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 FEB 20 AM 9:15  
TALLAHASSEE, FLORIDA