

LO3000014628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

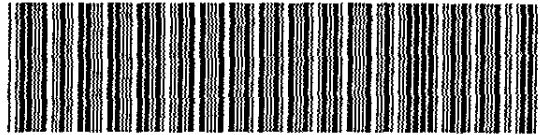
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03 APR 23 AM 8:57
SECRETARY OF STATE
TALLAHASSEE FLORIDA

I have enclosed my check to cover Articles of Organization fees. Please send me a certified copy of the articles. My address is as follows:

David Gifford
316 S. MacDill Avenue
Tampa, FL 33609

If there are any questions please call me at (813) 348-0800.

Thank You,

A handwritten signature in black ink, appearing to read "David Gifford". The signature is fluid and cursive, with the first name "David" and last name "Gifford" clearly distinguishable.

David Gifford

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FOXY PROPERTIES, L.L.C.

ARTICLE II - Address:

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

5445 GULF BLVD. #507
ST. PETE BEACH, FL 33706

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

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

JOHN D. FOX

Name


5445 GULF BLVD. #507

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

ST. PETE BEACH, FLORIDA 33706

City, State, Zip

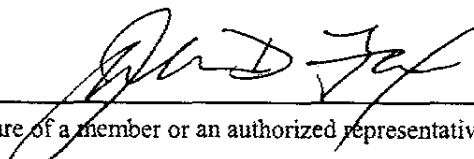
Having been named as registered agent and to accept service of process for the stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes 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.



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.)

JOHN D. FOX

Typed or printed name of signee

03 APR 23 AM 8:57
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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