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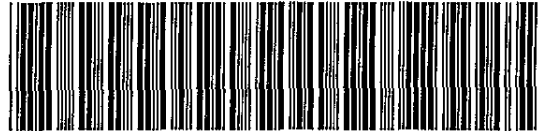
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SECULAR PARTY
TALLAHASSEE, FLORIDA

Lisa N. Klemme

Cover Letter

To: Registration Section/Division of Corporations
From: Lisa Klemme
Date: June 19, 2003
Re: LLC Articles of Organization

FILED
03 JUL 11 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Lisa N. Klemme
1909 E. Marks St
Orlando, FL 32803
407.898.5537



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 27, 2003

LISA KLEMME
1909 E. MARKS ST.
ORLANDO, FL 32803

SUBJECT: MAENLY LLC
Ref. Number: W03000018530

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MAENLY LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 103A00039152

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Maehly LLC

ARTICLE II - Address.

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

1909 E. Marks St. Orlando, FL 32803

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

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

Lisa Klemme

Name

1909 E. Marks St.

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

Orlando FL 32803

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.

Lisa Klemme

Registered Agent's Signature

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

Lisa Klemme

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.)

Lisa Klemme

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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03 JUL 11 AM 11:14
SECRETARY OF
TALLAHASSEE, FLORIDA