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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL 31 AM 10:35

2518 Sheffield Dr.
Deltona, FL 32738
July 29, 2003

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed are two (2) Articles of Organization for Florida Limited Liability Company forms. They are for:

1. Allee's Vacation Home, LLC
2. Ginny's Vacation Home, LLC

Also attached to each is a \$125 check to cover the Filing Fee for Articles of Organization and Designation of Registered Agent fee.

Thank you,

Virginia T. Patterson

Virginia T. Patterson

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Allee's Vacation Home, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Virginia T. Patterson
(Name of Person)

Allee's Vacation Home, LLC
(Firm/Company)

2518 Sheffield Dr.
(Address)

Deltona, FL 32738
(City/State and Zip Code)

For further information concerning this matter, please call:

Virginia T. Patterson at (386) 860-1605
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Allee's Vacation Home, LLC

ARTICLE II - Address:

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

Principal Office Address:

2518 Sheffield Dr.

Deltona, FL 32738

Mailing Address:

2518 Sheffield Dr.

Deltona, FL 32738

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

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

Virginia T. Patterson

Name

2518 Sheffield Dr.

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

Deltona, FL 32738

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..

Virginia T. Patterson

Registered Agent's Signature

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DIVISION OF CORPORATIONS
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(CONTINUED)

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member

Virginia T. Patterson

2518 Sheffield Dr.

Deltona, FL 32738

MGR

NOTE: An additional article must be added if an effective date is requested.

Virginia T. Patterson
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.)

Virginia T. Patterson
Typed or printed name of signee

\$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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