103000037093

00789-00623-00 le71

(Red	questor's Name)
(Add	dress)
(Add	dress)
(City	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bus	siness Entity Name)
(Doc	cument Number)
1	
Certified Copies	Certificates of Status
Special Instructions to F	Filing Officer:
	i
9/29 F	TLC -
	13-24942
$M_{\mathcal{O}}$	12/2014/7

Office Use Only



700022964437

09/16/03--01029--004 **155.00

MJH

O3 SEP 29 AH 8: 56

Cover Letter for formation of Florida LLC

Please find in accompaniment of this cover letter:

- 1. Articles of Organization for Florida Limited Liability Company in the proposed name of: *Char-Gin, LLC*
- 2. A check in the amount of \$155.00 To include;

\$100.00 filling fee

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified copy

Please direct any questions to:

Charles R. Painter 8566 W. Drew Ct. Homosassa, Fl 34448

Phone (352) 382-7677

Thank you for your attention



September 19, 2003

CHARLES R. PAINTER 8566 W. DREW CT. HOMOSASSA, FL 34448

SUBJECT: CHAR-GIN, LLC Ref. Number: W03000026942

We have received your document for CHAR-GIN, LLC and your check(s) totaling \$155.00. 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) 245-6967.

Michelle Hodges Document Specialist

Jan Harry

Letter Number: 803A00052015

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Char-Gin, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 8566 W. Drew Ct. Homosassa, Fl 34448

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

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

P.O. Box NOT acceptable)
_{FL} 34448
ļ

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.)

Charles R. Painter

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)