

L04000010527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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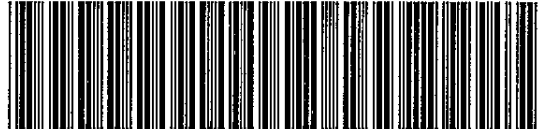
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA



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**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Main Street Residential Development, LLC

**Filing Evidence**

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

**Retrieval Request**

- ☐ Photocopy
- ☐ Certified Copy

**Type of Document**

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

FILED  
04 FEB -9 PM 5:32  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

**ARTICLE I - NAME:**

The name of the Limited Liability Company is: MAIN STREET RESIDENTIAL DEVELOPMENT, LLC

**ARTICLE II - ADDRESS:**

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

PRINCIPAL OFFICE ADDRESS:  
P.O. Box 2630  
Westport, CT 06880

MAILING ADDRESS:  
P.O. Box 2630  
Westport, CT 06880

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:** The Name and the Florida street address of the registered agent are:

Charles M. Kelly, Jr.

Name

2640 Golden Gate Parkway, Suite 305

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

Naples, Florida 34105

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

#### **ARTICLE IV - MANAGER(S) OF MANAGING MEMBER(S):**

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


TITLE:

NAME AND ADDRESS:

MANAGING MEMBER

ELWOOD B. DAVIS  
P.O. Box 2630  
WESTPORT, CT 06880

#### **REQUIRED SIGNATURE:**



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 M. Kelly, Jr

#### **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)**