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(Re	equestor's Name)	
(Ac	idress)	<u>, , , , , , , , , , , , , , , , , , , </u>
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	,
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	:	





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TRANSMITTAL LETTER

BJECT:	STEVE YEOMANS, LLC
	(Name of Limited Liability Company)
enclosed Arti	cles of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
_	Steve Yeomans
	(Name of Person)
****	(Firm/Company)
	15151 Shamrock Dr.
	(Address)
_	Fort Myers, FL 33912
•	(City/State and Zip Code)
or further inform	
9	Steve Yeomans at (239) 489-4120
,	

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 04 FFB 12 PM 2: 44

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: STEVE YEOMANS, LLC	:
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
15151 Shamrock Dr.	15151 Shamrock Dr.
Fort Myers, FL 33912	Fort Myers, FL 33912
The name and the Florida street address of the Steve Ye	omans
Name	
15151 Sha	amrock Dr.
Florida street address (P.	O. Box NOT acceptable)
Fort Myers	s _{FL} 33912
City, State,	and Zip
liability company at the place designated in this registered agent and agree to act in this capacit	ty. I further agree to comply with the provisions of all formance of my duties, and I am familiar with and

(CONTINUED)

SEVISION OF CORPORATIONS

ARTICLE IV-	- Manager(s)	or Managing	Member(s)
				~,

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

<u>tle:</u> 1GR" = Mana	ager	Name and Address:
	anaging Member	
manager		Steve Yeomans
		15151 Shamrock Dr.
		Fort Myers, FL 33912
	w	
OTE: An ad	ditional article mu	st be added if an effective date is requested.
EQUIRED S	IGNATURE:	
EQUIRED S.	IGNATURE:	Store Jeonans
EQUIRED S		Howe Jeanand mber or an authorized representative of a member.
EQUIRED S	Signature of a me	h section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of periury
EQUIRED S	Signature of a median (In accordance with of this document contact and accordance with the signature of the	h section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of periury
EQUIRED S	Signature of a median (In accordance with of this document contact and accordance with the signature of the	h section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury d herein are true.)

Page 2 of 2

\$ 5.00 Certificate of Status (Optional)