

L04000014531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

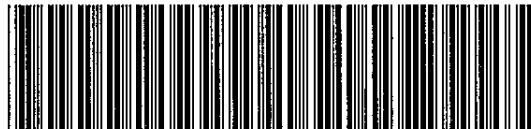
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400028816764

U2/24/04--010U2--017 **125.00

Handwritten signature

RECEIVED
04 FEB 24 AM 10:04
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
04 FEB 24 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Palm Springs RV Center Inc

04 FEB 24 AM 11:05
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
✓ ____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

Signature _____

Requested by _____

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

**ARTICLES OF ORGANIZATION FOR
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I-Name

The name of the Limited Liability Company is **PALM SPRINGS RV CENTER, LLC**

ARTICLE II-Address

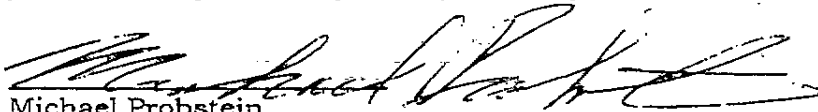
The mailing address and street address of the principal office of the Limited Liability Company is: 3408 Lakeview Drive, Delray Beach, Fl 33445

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

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

Michael Probst
Name
3408 Lakeview Drive
Florida street address
Delray Beach, Fl 33445
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.



Michael Probst
Registered Agent

ARTICLE IV-Management

The Limited Liability Company is to be managed by the manager and is therefore, a manager-managed company. The manager will be Michael Probst.

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury and the facts stated herein are true.



Michael Probst, Manager

FILED
04 FEB 24 AM 11:05
CLERK OF STATE
TALLAHASSEE, FLORIDA