# 104000016061

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
, , , , ,	
PICK-UP WAIT MAIL	
(Ducing Fish, Name)	
(Business Entity Name)	
(Document Number)	
1	
Certified Copies Certificates of Status	
Consideration to Ellino Office	
Special Instructions to Filing Officer:	
2/19 FULC	
craws	





300028751253

12/20/04--01015--006 \*\*160.00

HUM

O4FEB 19 MM 9: 08

## TRANSMITTAL LETTER

SUBJECT: Morris Properties and Investments, LLC
(Name of Dimited Liability Company)

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

TO:

Registration Section Division of Corporations

Please return all correspondence concerning this matter to the following:

Dorothy Nattiel-Morris

(Name of Person)

Morris Properties and Investments, LLC

(Firm/Company)

5648 Spectacular Bid Drive

(Address)

Wesley Chapel Florida 33544

(City/State and Zip Code)

For further information concerning this matter, please call:

Poroffy Nattel-Morris at (813) 907-7410

(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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
Morris Properties an	d Investments, LLC
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5648 Spectacular Bid.	Prive same as
Wesley Chapel, F133544	+ principaladdress
	gistered agent are:

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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

# ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGR Corvin Morris 5643 Sectaula Biol prive Wesley Chopel, Fl 33544 Dorothy Nattiel Morris 5648 Sectaular Biol prive Wesley Chopel, Fl 33544 (Use attachment if necessary)

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

**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.)

The No. 1

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)