

L04000035581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

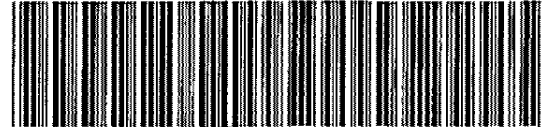
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAY -4 AM 10:43

FILED

05/04/04--01057--024 **155.00

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: 5161 Island Date Street, LLC

To whom it may concern:

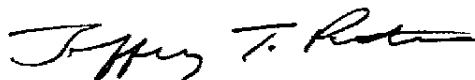
The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kathleen Petersen
2425 Gulf of Mexico Dr., #7A
Longboat Key, FL 34228

In addition, if possible we would request that a copy of the filed articles be faxed to Ms. Petersen at (941) 383-2728. For further information, please call Miss Petersen at (941) 383-9422. Thank you very much.

Very truly yours,



Jeffrey T. Petersen

04 MAY - 4 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Ends. \$155.00 check for

- (i) Filing (\$100.00)
- (ii) Designation Registered Agent (\$25.00)
- (iii) Certified Copy (\$30.00)

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
04 MAY -4 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

5161 Island Date Street, LLC

ARTICLE II - Address:

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

Principal Office Address:

2425 Gulf of Mexico Dr., #7A
Longboat Key, FL 34228

Mailing Address:

5380 Gulf of Mexico Dr.
Suite 105-171
Longboat Key, FL 34228

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

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

Kathleen Petersen
Name
2425 Gulf of Mexico Dr., #7A
Florida street address (P.O. Box **NOT** acceptable)
Longboat Key, FL 34228
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, Florida Statutes..

Kathleen Petersen JTP
Registered Agent's Signature

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

Name and Address:

Managing Member
MGRM

Kathleen Petersen
2425 Gulf of Mexico Dr. #7A
Longboat Key, FL 34228

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

Article V - An effective date of May 3, 2004 is requested for this L

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

REQUIRED SIGNATURE:

Jeffrey T. Petersen
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.)

JEFFREY T. PETERSEN
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)