

L04000058784

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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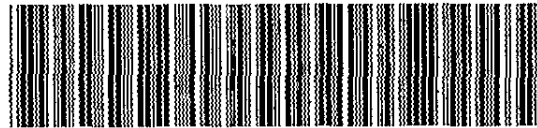
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

L04-58784
OK

DIANE S. GUTHRIE
ATTORNEY AT LAW
1175 NORTH COURTENAY PARKWAY - SUITE 3A
POST OFFICE BOX 541323
MERRITT ISLAND, FL 32954-1323

TELEPHONE: (321) 453-6690

FACSIMILE: (321) 453-6691

August 3, 2004

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Subject: F & L LLC

Gentlemen:

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

Filing Fee: \$100.00
Designation of Registered Agent: \$25.00
Certificate of Status: \$5.00

Total Fee: \$130.00

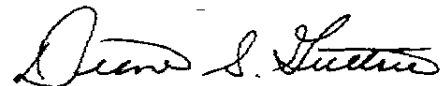
Please return all correspondence concerning this matter to the following:

Diane S. Guthrie, Esquire
Post Office Box 541323
Meritt Island, Florida 32954-1323

For further information concerning this matter, please call:

Diane S. Guthrie at (321) 453-6690

Very truly yours,



Diane S. Guthrie

DSG:mlt
Enclosures: as stated

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
F & K LLC
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

F & K LLC

ARTICLE II - Address:

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

Principal Office Address:

606 Limerick Drive
Merritt Island, Florida 32953

Mailing Address:

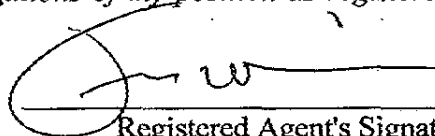
606 Limerick Drive
Merritt Island, Florida 32953

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

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

Frank Winn
606 Limerick Drive
Merritt Island, Florida 32953

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

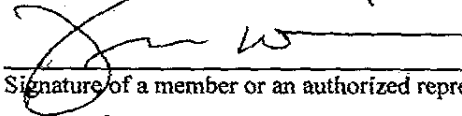
"MGRM" = Managing Member

Name and Address:

Frank Winn MGRM

606 Limerick Drive
Merritt Island, Florida 32953

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.)

Frank Winn
Typed or printed name of signee

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