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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Condit and Rice Properties LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
John Gilbert Condit (Name of Person)
Condit + Rice Properties (Firm/Company)
456 Toledo St. (Address)
Schastian Florida 32958 (City/State and Zip Code)
For further information concerning this matter, please call:
Tohn Gilbert Condit at (772) 778-3113 Work (Name of Person) (Area Code & Daytime Telephone Number) 772 589-7741 home
1.3 T
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:
Condit + Rice	Properties LLC
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
456 Tolado St	456 Toledo St
Sebastian	Schastian
FL 32958	FL 32958
The name and the Florida street address of the John Gilbe Nam 456 Toledo Florida street address (P	ert Condit
	FLORIDA 32958
Having been named as registered agent and to accept see company at the place designated in this certificate, I her agree to act in this capacity. I further agree to comply w and complete performance of my duties, and I am familiar registered agent as provided for in Registered Agent	ervice of process for the above stated limited liability reby accept the appointment as registered agent and ith the provisions of all statutes relating to the proper iar with and accept the obligations of my position as Chapter 608, Florida Statutes

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:	Name and Address:			
"MGR" = Manager "MGRM" = Managing Member				
MGR	John Gilbert Cond 456 Toledo St Schastian, FL 32	lit 958	3	
MGRM	Linda C. Condit 456 Toledo St Schastian, FL 3	295	<u> </u>	
MGRM	David A. Rice 5412 NE 25 Aue Ft. Landerdale, F			8
(Use attachment if necessary)	Tane C. Rice 5412 NE 25 AUE Ft. Landerdale	, FL	 33	3 0g
NOTE: An additional article must be	added if an effective date is reques	ted.		
REQUIRED SIGNATURE:				
Jane C Ric			<u></u>	
Signature of a member or an authorized representative of a member.		•	100 100 100 100 100 100 100 100 100 100	
(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.)			<u>ئ:</u> ئا	
Jane C Ri Typed or pri	nted 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)