

L04000092615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP\_ ☐ WAIT ☐ MAIL

(Business Entity Name)

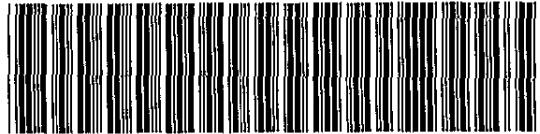
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04 DEC 22 PM 5:28  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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04 DEC 22 PM 2:18  
TALLAHASSEE, FLORIDA

(CLAUDE R. WALKER, ESQ.)

HUEY, GUILDAY & TUCKER, P.A.

P. O. BOX 12500

TALLAHASSEE, FL 32317-2500

Address

Attn: Julie

224-7091

City/State/Zip

Phone #

Office Use Only

FILED  
04 DEC 22 PM 5:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Pope Brothers Real Estate LLC

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time

Call Julie when ready: 224-

7091

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

\$125.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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04 DEC 22 PM 5:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR  
POPE BROTHERS REAL ESTATE, LLC  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is Pope Brothers Real Estate, LLC.

**ARTICLE II - Address:**

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

**Principal Office Address:**

2580 Care Drive, Unit #1  
Tallahassee FL 32308

**Mailing Address:**

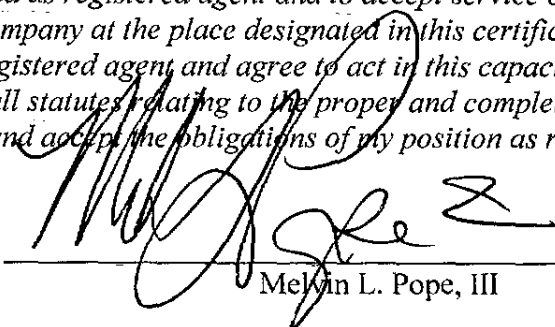
Same

**ARTICLE III - Registered Agent, Registered Office and Registered Agent's Signature:**

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

Melvin L. Pope, III  
2580 Care Drive, Unit #1  
Tallahassee FL 32308

*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.*

  
\_\_\_\_\_  
Melvin L. Pope, III

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

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

**Title:**

"MRG" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM —

Melvin L. Pope, III  
2580 Care Drive, Unit 1  
Tallahassee FL 32308

**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:

  
\_\_\_\_\_  
Melvin L. Pope, III

(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.)