

LOS 0000006648

LOS-6648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status         

Special Instructions to Filing Officer:

Office Use Only

1/21  
Cust



700044949967

01/24/05--01001--012 \*\*155.00

FILED RECEIVED  
05 JAN 21 PM 3:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

SUBJECT: Piney Point Plantation 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:

Brown E. Fitzgerald  
(Name of Person)

Antbs h-

203 1/2 W. Monroe St  
(Address)

TAKLONASSER PL 303.03  
(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (850) 224-0558  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee      ☐ \$130.00 Filing Fee & Certificate of Status      ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)      ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**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

05  
MAR 21 PM 4:00  
FILED  
FALLABEACH STATE  
FALLABEACH STATE

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

PINEY POINT PLANTATION 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:

5101 N LAGOON DR  
PANAMA CITY BEACH FL 32408

5101 N LAGOON DR  
PANAMA CITY BEACH FL 32408

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

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

MARK C BANE III

Name

5101 N LAGOON DR

Florida street address (P.O. Box **NOT** acceptable)

PANAMA CITY BEACH FL 32408

City, State, and Zip

FILED  
05 MAR 21 PM 4:00  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

*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..*

  
\_\_\_\_\_  
Registered Agent's Signature

(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

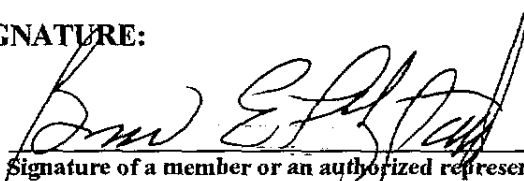
MGRM \_\_\_\_\_ MARK C BANE III  
5101 N LAGOON DR  
PANAMA CITY BEACH FL 32408

MGR \_\_\_\_\_ BRIAN F FITZGERALD  
P O BOX 12812  
TALLAHASSEE FL 32317

(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.)

BRIAN E FITZGERALD

Typed or printed name of signee

**Filing Fees:**

**\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**