

LD500000 9767

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

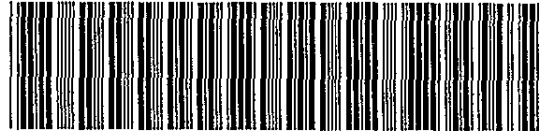
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300044754603

01/21/05--01017--024 **130.00

FILED

2005 JAN 21 A 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PR 2/1

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Captiva Realty 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:

A. Peter Aldrian
(Name of Person)

Captiva Realty LLC.
(Firm/Company)

P.O. Box 613 311 SPANISH GOLD LN
(Address)

Pineland FL 33945 UPPER CAPTIVA 33924
(City/State and Zip Code)

For further information concerning this matter, please call:

A. Peter Aldrian at (239) 292-4849
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2005 JAN 21 11:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Captiva Realty LLC.

ARTICLE II - Address:

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

Principal Office Address:

A. Peter Aldrian

311 SPANISH GOLD LN
UPPER CAPTIVA 33924

Mailing Address:

P.O. Box 613

Pineland FL 33945

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

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

A. Peter Aldrian

Name

311 Spanish Gold Ln.

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

Upper Captiva

FL 33924

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, F.S..

A. Peter Aldrian

Registered Agent's Signature

(CONTINUED)

FILED
2005 JAN 21
TALLAHASSEE, FL
SECRETARY OF STATE

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:

MGR _____

_____ A. Peter Aldrian

_____ P.O. Box 613

_____ Pineland FL 33945

(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.)

A. Peter Aldrian

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)

FILED
2005 JAN 21 A 11: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA