Electronic Filing Cover Sheet

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(((H050000331013)))

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : HOLBROOK, AKEL, COLD, STIEFEL & RAY, P.A.

Account Number : 120020000128 Phone : (904)356-6311 : (904)356-7330 Fax Number

## ED LIABILITY COMPANY

1555 E. 8th Street, LLC

Certificate of Status	1
Certified Copy	0
Page Count	82
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing

Public Access Help.

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ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	
1555 E. 8th Street, LLC	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1102 1st Street Neptune Beach, FL 32266	1102 1st Street Neptune Beach, FL 32266
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the r	registered agent are:
Kathleen Holbro Name	ok_Cold
	Drive. Suite 2301 dress (P.O. Box NOT acceptable)
Jacksonville City, State, a	PL 32202 and Zip
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointifient as y. I further agree to comply with the provisions of all informance of my duties, and I am familiar with sind stered agent as provided for in Chapter 1808, F.S.

Registered Agent's Signature

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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:
MGR	David A. Baker 1102 Ist Street
	Neptune Beach, FL 32266
MGR	Mary A. Baker 1102 1st Street
	Neptune Beach, FL 32266
	<u>,</u>
(Use attachment if necessary)	<b>.</b>

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.)

Kathleen Holbrook Cold
Typed or printed name of signce

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)

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SECRETARY OF STATE

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