## 105000023745

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
		3/10.
	<u> </u>	
	Office Use Only	



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SECRETARY 6 STY ALLAHASSEE, FLOOR

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## TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

For further information concerning this matter, please call:

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

ARTICLE II - Address:	
The mailing address and street address of th	e principal office of the Limited Liability Compan
Principal Office Address:	Mailing Address:
2879 CROSS LANE	2879 CROSS LANG MARIANNA, FL 324
MARIANNA, FL 32446	MARIANAA, FL 324
	ered Office, & Registered Agent's Signature:
	he registered agent are:
ne name and the Florida street address of t	he registered agent are:
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ne name and the Florida street address of the HARDY CA	he registered agent are:  ROSS  AHAGSET  AGSET  AND  AND  AND  AND  AND  AND  AND  AN
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he name and the Florida street address of the Name and the Name and the Florida street address of the Name and the Nam	he registered agent are:  POSS  ame  ASSET ARE  (P.O. Box NOT acceptable)

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, Florida Statutes..

company at the place designated in this certificate, I hereby accept the appointment as registered agent and

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: "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	HARDY CROSS 2879 CROSS LANE MARIANNA, FL 32446		·
· · · · · · · · · · · · · · · · · · ·			
·		 	
(Use attachment if necessary)		 	£ -
NOTE: An additional article must be REQUIRED SIGNATURE:	added if an effective date is requested.	2005 MAR - SECRETAR TALLAHASS	
Signature of a member or an a	uthorized representative of a member.  .408(3), Florida Statutes, the execution affirmation under the penalties of perjury ue.)	RY OF STATE SEE, FLORIDA	
HARDY Typed or pr	CROSS inted 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)