

L05000030031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP ..

☐

WAIT

☐

MAIL

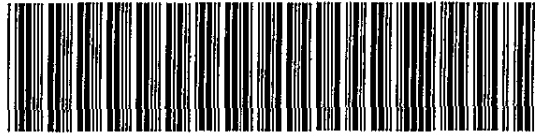
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000047016520

03/25/05--01027--022 **130.00

FILED
05 MAR 25 2005
TALLAHASSEE, FLORIDA

T. Brumbley MAR 20 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Old Town 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:

Larry Toomey
(Name of Person)

(Firm/Company)

209 Trenton Dr.

(Address)

Slidell La. 70461

(City/State and Zip Code)

For further information concerning this matter, please call:

Larry Toomey at 985, 707-5271
(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

FILED
05 MAR 25 AM 10:56
TALLAHASSEE, FLORIDA

ARTICLE 1711, FLSA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Old Town LLC

ARTICLE II - Address:

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

Principal Office Address:

1997 Shannon's Cove
Miramar Beach FL 32550

Mailing Address:

1997 Shannon's Cove
Miramar Beach FL 32550

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

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

Steve Swalley
Name

1997 Shannon's Cove
Florida street address (P.O. Box **NOT** acceptable)

Miramar Beach FL 32550
City, State, and Zip

FILED
05 MAR 25 AM 10:56
TALLAHASSEE, FLORIDA

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..

Steve Swalley
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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Larry Toomey
209 Trenton Dr
Slidell LA. 70461

MGRM

Steve Swalley
1997 Shannon's Cove
Miramar Beach FL 32550

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Larry Toomey

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.)

Larry Toomey

Typed or printed name of signer

FILED
05 MAR 25 AM 10:56
STATE OF FLORIDA
TALLAHASSEE

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)