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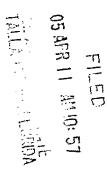
(Requestor's Name)	· · · · · ·
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	3
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T. Brumbley APR 1 3 2005

TRANSMITTAL LETTER

TO: Registration Se Division of Cor		•	
SUBJECT:	Name of Limited	erties LLC. Liability Company)	
The enclosed Articles of	Organization and fee(s) are su	bmitted for filing.	
Please return all correspondent	ondence concerning this matter	r to the following:	
	Kathryn	Mayo Jame of Person)	
	(E	irm/Company)	
	55 Sm	YVN4 Dr. (Address)	
	De Bary (Chyl	FL 327/3 State and Zip Code)	OS APR
For further information	concerning this matter, please of	call:	
Kathr (Namé	yn Mayo of Person)	at (734) 730 (Area Code & Daytime To	OS APR I FILED - 0987 (lephone Number) S160.00 Filing Fee.
Enclosed is a check for	or 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)
	ET ADDRESS: ration Section	MAILING A Registration S	

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Flamayo Properties LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 55 Smyrna Dr.

DeBary, FL 32713

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

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

Kathryn Mayo 55 Smyrna Dr. DeBary, FL 32713

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.

Signature Kothing Mays
ARTICLE IV - The Limited Liability Company is to be a member-managed company and the
name and address of the Managing Member is:
Kathryn Mayo
55 Smyrna Dr.
DeBary, FL 32713
Signature of Member Follows Mayo (In accordance with section 608.408(3), Florida Statutes, the execution of this document
(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.)
Kathryn Mayo
(Typed name of signee)

Enclosed is \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent and \$5.00 for Certificate of Status.