(05000)44488

(Re	equestor's Name)	
(Ac	ldress)	
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: CARROLL R. HUNTER L.L.C. (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:
CARROLL R. HUNTER
CARCOLL R. HUNTER L.L.C. (Firm/Company)
P.O. 1079, #1 NORTH TUTTLE AVE, SUITE
SARASOTA, FL 34230 -1079 (City/State and Zip Code) ZIA CODE FOR STEET ADDRESS 15 34237
For further information concerning this matter, please call:
CARBUL R. HUNTER at (941) 957-1310 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certified Copy (additional copy is enclosed) \$\bigcup \\$160.00 Filing Fee & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CARROLL R. HUNTER L.L.C.

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

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
NORTH TUTTLE AVE SUITE 5 SARASOTA FL 34237	P.O. Box 1079 SARASOTA, FL 34230,079
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re	
CARROLL R. Name 1 NORTH TUT Florida street add SARASOTA City, State, a	TLE AVE, SUITE 5 ress (P.O. Box NOT acceptable) FL 34237
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a I further agree to comply with the provisions of all reformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

The name and address of each Manage	er or ivializing intention is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	CARROLL R. HUNTER #1 N. TUTTLE AVE 57E 5 SARASOTA FL 34237
(Use attachment if necessary)	
NOTE: An additional article must b	oe added if an effective date is requested.
REQUIRED SIGNATURE:	2 Hut
(In accordance with sect	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.
CARRS LL	ed 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)