

W050000 45588

(Requestor's Name)

Glen K Hutchins
P O Box 654
Stuart, FL 34995

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 3, 2005

GLEN HUTCHINS
P.O. BOX 654
STUART, FL 34995

SUBJECT: AVENUE D INVESTMENTS
Ref. Number: W05000022303

We have received your document for AVENUE D INVESTMENTS and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 105A00031467

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

AVENUE D INVESTMENTS L.L.C.**ARTICLE II - Address:**

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

Principal Office Address:9967 S.W. VENTURA DRIVE
PALM CITY, FLORIDA 34990**Mailing Address:**P.O. Box 654
STUART, FL 34995**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

GLEN K HUTCHINS
Name9967 S.W. VENTURA DRIVE
Florida street address (P.O. Box **NOT** acceptable)
PALM CITY FL 34990
City, State, and ZipSECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.


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

GLEN K HUTCHINS

9967 S.W. VENTURA DRIVE

PALE CITY, FL 34990

MGRM

MARK G. HUTCHINS

1934 LAKE PLACE

JENSEN BEACH, FL 34957

MGRM

WILLIAM S SKARYD

1913 NE LAKE PLACE

JENSEN BEACH, FL 34957

MGRM

ANIBAL AMARAL

897 WOODLAND DRIVE

PORT ST LUCIE, FL 34952

(Use attachment if necessary)

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.)

GLEN K HUTCHINS

Typed 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)

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TALLAHASSEE, FLORIDA

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