## L05000055069

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Business Endly Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	



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SECRETARISE FOR ORDER

Office Use Only

## TRANSMITTAL LETTER

	ment of Florida UC			
The enclosed Articles of Organization and fee(s) are Please return all correspondence concerning this man  Tames W A	tter to the following:			
PO Box 4318; Brooklyn Park	<u>j</u> ri	05 MAY 24 PM 1:51	1 7 7 7	
For further information concerning this matter, please call:  B. Scott Binin at (763) 3/5-5007  (Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:  \$\Boxed{1} \$125.00 \text{ Filing Fee} \Boxed{1} \$130.00 \text{ Filing Fee} & \text{Certificate of Status}\$	& \$155.00 Filing Fee & \$160.00 Filing F Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	&		
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section			

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:

Brandon Developmen	t of Florida LLC
ARTICLE II - Address: The mailing address and street address of the particle.	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
215 E Cypress Way E Apt * D5 Naples FL 34/10	P.O. Box 43187  Brooklyn Park IN 55443
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the	registered agent are:
James W A	bbott EDRE 5
	that E Apt D5  dress (P.O. Box NOT acceptable)
City, State,	FL 34//o and Zip

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..

(CONTINUED)

gistered Agent's Signature

Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	James W Abbott 4023 1364 lan NE How late My 5530 4
Member	Joe Cole 14160 Caral Sofret Han Cala MV 55304
Member	Nancy Thompson 5652 Morgan Ar S. Minneage to MN 55418
(Use attachment if necessary)	

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

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

**REQUIRED SIGNATURE:** 

Signature of a member of 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.)

James W Abbott

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)

CAHASSEE, FLORIDA

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