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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ATLANTIC NATIONAL ACQUISITIONS, 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:

CHRISTOPHER B. KNOX
(Name of Person)

LAW OFFICE OF CHRISTOPHER B. KNOX
(Firm/Company)

300 South Pine Island Road, Suite 210
(Address)

Plantation, Florida 33324
(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher B. Knox at (954) 476-9997
(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

RECEIVED
DIVISION OF CORPORATIONS
JAN 11 1992

ARTICLES OF ORGANIZATION
OF
ATLANTIC NATIONAL ACQUISITIONS, LLC

In compliance with the requirements of Chapter 608 of the Florida Statutes, the undersigned, being a natural person, hereby acts as an incorporator in adopting and filing the following Articles of Organization for the purpose of organizing a Limited Liability Company.

ARTICLE ONE

The name of the Limited Liability Company is:

ATLANTIC NATIONAL ACQUISITIONS, LLC

ARTICLE TWO

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

4952 Gulfshore Boulevard, #601
Naples, Florida 34103

ARTICLE THREE

The name and Florida street address of the initial registered agent is:

Allen H. Good
4952 Gulfshore Boulevard, #601
Naples, Florida 34103

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 of the Florida Statutes.

Date: 5/27/05


Allen H. Good, Registered Agent

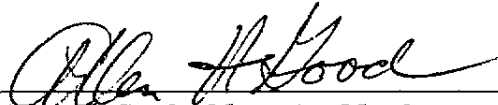
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE FOUR

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

Allen H. Good, Managing Member
4952 Gulfshore Boulevard, #601
Naples, Florida 34103

IN WITNESS WHEREOF, the undersigned Member has executed these Articles of Organization on May 27, 2005.


Allen H. Good, Managing Member

(In accordance with §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.)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA