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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 3001 5W 3rd Terrace 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:	
Rebecca R. Croslyn (Name of Person)	
(Firm/Company)	
3001 Sw 3rd Terrace (Address)	
Okeechobee Florida 34974 (City/State and Zip Code)	
(City/State and Zip Code)	•
For further information concerning this matter, please call:	ا چ وند چهدرسو
For further information concerning this matter, please call: Rebecca Cros 4 at (863) 634-7612 Gr (Name of Person) (Area Code & Daytime Telephone Number) 863 - 634 - 7611 Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status 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

FROM;

BECKY R. CROSLYN 3001 SW 3RD TERRACE OKEECHOBEE,FL.34974

PHONE (863)634-7612 (863)634-7611



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
3001 SW 3rd Terrace, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
3001 Sw 3rd Terrace 3001 Sw 3rd terrace CKeechobee, Fl. OKeechobee, Fl. 34974
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Rebecca Croslyn
3001 Sw 3rd Terrace Florida street address (P.O. Box NOT acceptable)
OKeechobee FL 34974 City, State, 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)

Registered Agent's Signature

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

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

<u>Title:</u> "MGR" = Mana "MGRM" = Ma	iger naging Member	Name and Address:	
MGR		JAMES E. Cros 2010 SW Loth Ave Okeechober FL	14n 34974
mG R m		Rebecca R. Cro 2010 SW John Au OKrechobee, Fl. 39	e 1974
(Use attachmen	t if nacassary)		
•	• •	added if an effective date is requested	ı.
REQUIRED S	IGNATURE:		
-	Signature of a member or (In accordance with section of this document constitute that the facts stated herei	an authorized representative of a member. 1 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury in are true.) Crosty root printed name of signee	OS JUN 10 AM 10: 51

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)