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M. HODGES

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# 'TRANSMITTAL LETTER

TO: Registration Se			
SUBJECT:	WELL DEVELOP (Name of Limited	MENT, LLC I Liability Company)	
The enclosed Articles of	f Organization and fee(s) are st	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	ERIK WORTH	MANN Bame of Person)	
	(1	Firm/Company)	
	630 TURKE	Y CREEK (Address)	
	ALACHUA (City/	FL 32615 State and Zip Code)	
For further information of	concerning this matter, please of	call:	
ERIL WORT	HMANN of Person)	at (35 Z) 226- (Area Code & Daytime Te	elephone Number)
Enclosed is a check fo	r 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)
STRE	ET ADDRESS:	MAILING A	DDRESS:

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:	
SWELL DEVELOPMENT, LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Com	many is
The maining address and street address of the principal office of the Emitted Enablity Con-	ipairy is.
Principal Office Address: Mailing Address:	
12128 NW 74th Terr 630 Turkey Creek Alachua, FL 32615 Alachua, FL 32615	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature	:
The name and the Florida street address of the registered agent are:	35 Ta
ERIK WORTHMANN Name	Š
Florida street address (P.O. Box NOT acceptable)	14 17
Alachua FL 32415 City, Stute, 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..

Registered Agent's Signature

(CONTINUED)

<u>Title:</u> "MGR" = Mana; "MGRM" = Mar		Name and Address:
MGRM	<del></del>	Erik Worthmann 630 Turbuy Creek Alachia, FL 321.15
	• •	be added if an effective date is requested
NOTE: An add	litional article must	be added if an effective date is requested
Use attachment NOTE: An add	GNATURE:  Signature of a member  (In accordance with sect of this document constit that the facts stated here.)	r or an authorized representative of a member. tion 608,408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)