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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

SUBJECT: Retired Palms, 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:

Dudley J. Herrin, Jr.
(Name of Person)

N/A
(Firm/Company)

9287 Westshore Drive
(Address)

Weeki Wachee, FL 34613
(City/State and Zip Code)

For further information concerning this matter, please call:

Dudley Herrin at (352) 597-3713
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Retired Palms, LLC

ARTICLE II - Address:

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

Principal Office Address:

9287 Westshore Drive
Weeki Wachee, FL 34613

Mailing Address:

9287 Westshore Drive
Weeki Wachee, FL 34613

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

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

Dudley J. Herrin, Jr.

Name

9287 Westshore Drive

Florida street address (P.O. Box **NOT** acceptable)

Weeki Wachee, FL FL 34613

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.

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

Dudley J. Herrin, Jr.

9287 Westshore Drive

Weeki Wachee, FL 34613

MGRM

Judy C. Herrin

9287 Westshore Drive

Weeki Wachee, FL 34613

MGRM

Daniel Trehey

9239 Mississippi Run

Weeki Wachee, FL 34613

See Attachment

See Attachment

(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.)

Dudley J. Herrin, Jr.

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Attachment – Retired Palms, LLC

ARTICLE IV – Manager(s) or Managing Member(s) continued

<u>Title</u>	<u>Name and Address</u>
<u>MGRM</u>	<u>Paula Trehevy</u> <u>9239 Mississippi Run</u> <u>Weeki Wachee, FL 34613</u>
<u>MGRM</u>	<u>Michael C. Byrne, Jr</u> <u>9172 Mississippi Run</u> <u>Weeki Wachee, FL 34613</u>
<u>MGRM</u>	<u>Judith C. Byrne</u> <u>9172 Mississippi Run</u> <u>Weeki Wachee, FL 34613</u>

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