L050000 94689

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





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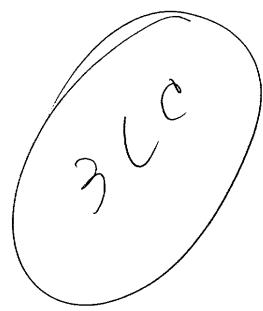
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Hurr	301	South Property	660



. (/ 1	Dissolution / Withdrawal	
	/	Annual Report / Reinstatem	ent
	/	Cert. Copy	_
	Photo Copy		
	Certificate of Good Standing	g	
	Certificate of Status		
		Certificate of Fictitious Nan	ne
		Corp Record Search	
		Officer Search	
		Fictitious Search	
Signature	Fictitious Owner Search		
Signature	Vehicle Search	<u>_</u>	
		Driving Record	<u>_</u>
Requested by:	UCC 1 or 3 File		
WL 9/2	UCC 11 Search		
Name Date	Time	UCC 11 Retrieval	
Walk-In Will Pic	k I in	Courier	

Art of Inc. File_

LTD Partnership File_ Foreign Corp. File_ L.C. File____

Fictitious Name File_

Merger File_____

Trade/Service Mark____

RA Resignation____

Art. of Amend. File_____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
HWY 301 SCUTH. PROPERTY, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
1202 PARRILLA SE AVILA, THOURA FIRST SIgnatures ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatures
The name and the Florida street address of the registered agent are:
CHRIS P. TSUKES
Name P. TSCKES
Florida street address (P.O. Box NOT acceptable)
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
Registered Agent's Signature
(An additional article must be added if an effective date is requested)
P. Falin
Signature of a/member or an autitorized 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.)
CHRIS P. TSOKOS
CITRIS P. TSOKUS Typed or printed name of signee
Filing Fees; \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)