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COVER LETTER

Division of Co			
SURJECT: Farma	at Resolutions, LLC		
	(Name of Limite	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Matthew	Singer _		
	(Name of Person)	
Farmat R	esolutions, LLC		
- 	(Firm/Company)	
1626 T ria	angle Palm Terra	ace	
		(Address)	
Naples,	FL 34119		
•	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Matthew Singe	er	at (239) 243-586 (Area Code & Daytime Te	05
(Name	of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for	or 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)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	is

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Farmat Resolutions, LLC	
Must end with the words "Limited Liability Company, "Lin	mited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
626 Triangle Palm Terrace	1626 Triangle Palm Terrace
Naples, FL 34119	Naples, FL 34119
ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own Re business entity with an active Florida registration.) The name and the Florida street address of th Matthew Singer Nar	e registered agent are:
1626 Triangle Palm T	errace
Florida street	address (P.O. Box <u>NOT</u> acceptable)
Naples	FL 34119
City, State	e, and Zip
TT I	(

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 Agem's Signature (REQUIRED)

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" = Manager "MGRM" = Managing Mem	Name and Address: ber
MGRM	Matthew Singer
	1626 Triangle Palm Terrace
	Naples, FL 34119
MGRM	Fara Singer
WORW	1626 Triangle Palm Terrace
	Naples, FL 34119
(Use attachment if necessary)
LE V: Effective date, if other	than the date of filing: (OPTION
ffective date is listed, the date days after the date of filing.)	e must be specific and cannot be more than five business da
REQUIRED SIGNATURE	:
Marth	W A.
эідлашге өі	a member or an authorized representative of a member.
_	

Matthew Singer Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

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