

L05000048547

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

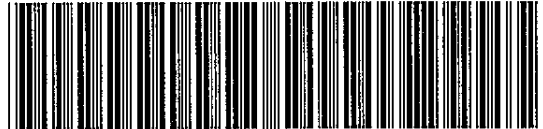
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EFFECTIVE DATE  
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TALLAHASSEE, FLORIDA

05 OCT - 6 PM 3:52

FILED

05 OCT - 3 PM 12:50  
TALLAHASSEE, FLORIDA

FILED



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 637805 7376179

AUTHORIZATION :

*Patricia K. S.*

COST LIMIT : \$ 155.00

EFFECTIVE DATE  
10/1/05

FILED  
05 OCT -6 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : October 6, 2005

ORDER TIME : 10:57 AM

ORDER NO. : 637805-005

CUSTOMER NO: 7376179

DOMESTIC FILING

NAME: ABCD PROPERTIES, LLC

EFFECTIVE DATE: OCTOBER 1, 2005

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Jamela Fordyce - EXT. 2936

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY**

**EFFECTIVE DATE**

10/1/05

05 OCT -6 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

**ARTICLE I  
NAME**

The name of the Limited Liability Company is **ABCD Properties, LLC.**

**ARTICLE II  
ADDRESS**

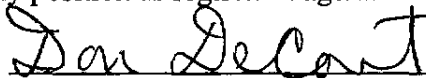
The mailing address and street address of the principal office of the Limited Liability Company is Law Office of Donald P. DeCort, P.A., 115 S. Fielding Avenue, Suite 3, Tampa, Florida 33606.

**ARTICLE III  
EFFECTIVE DATE**

The Limited Liability Company shall be effective as of October 1, 2005.

**ARTICLE IV  
REGISTERED AGENT, REGISTERED OFFICE,  
AND RESIDENT AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are Donald P. DeCort, Esquire, Law Office of Donald P. DeCort, P.A., 115 S. Fielding Avenue, Suite 3, Tampa, Florida 33606. Having been named as registered agent and to accept service of process for the above named limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree in this capacity. I further agree to comply with the provision 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.

  
\_\_\_\_\_  
Donald P. DeCort, Esquire

**ARTICLE V  
MANAGING MEMBER**

The name and address of the Managing Member is Donald P. DeCort, Esquire, Law Office of Donald P. DeCort, P.A., 115 S. Fielding Avenue, Suite 3, Tampa, Florida 33606.

IN WITNESS WHEREOF, the undersigned representative hereby acknowledges that, in accordance with Section 608.408(3), Florida Statutes, the execution of these Articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

A handwritten signature in cursive script, reading "Don DeCort", written over a horizontal line.

Donald P. DeCort, Esquire