

W05000111250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

W05-111250

(Document Number)

Certified Copies

1

Certificates of Status

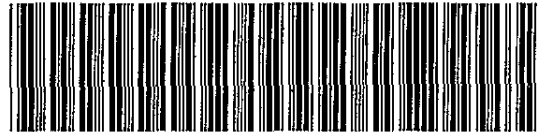
1

Special Instructions to Filing Officer:

11/10

FILE

Office Use Only



400061321834

11/10/05--01030--013 **160.00

M. HODGES

SECRETARY OF STATE
TALLAHASSEE FLORIDA

05 NOV 10 PM 4:13

FILED

TRANSMITTAL LETTER

Registration Section
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

SUBJECT: Capri Condo, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Scott Montgomery
Bent Tree Properties LLC
6428 Lansdowne Circle
Boynton Beach, FL 33437

Enclosed is a check for the following amount:

\$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed)

For further information concerning this matter, please call Scott Montgomery at (561) 731-5228.

Sincerely,


Scott Montgomery

Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME:

The name of this Limited Liability Company is:

Capri Condo, LLC

ARTICLE II - ADDRESS:

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

Principal Office Address:

Capri Condo, LLC
6428 Lansdowne Circle
Boynton Beach, FL 33437

Mailing Address:

Capri Condo, LLC
6428 Lansdowne Circle
Boynton Beach, FL 33437

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

Scott Montgomery

Name

6428 Lansdowne Circle

Florida street address

Boynton Beach, FL 33437

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 the 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, S.S.

Scott Montgomery

Registered Agent's Signature

05 NOV 10 PM 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE IV - MANAGING MEMBER:

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGRM	Scott Montgomery 6428 Lansdowne Circle Boynton Beach, FL 33437

ARTICLE V - FISCAL YEAR

This limited liability company's Fiscal year shall be the calendar year.

ARTICLE VI - PURPOSE

The purpose of this Limited Liability Company is to engage in Real Estate Investment and any other lawful business activity.

REQUIRED SIGNATURE:



Signature of member or an authorized representative

(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.)

Scott Montgomery
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
\$ 5.00 Certificate of Status