## U5000120375

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)  05-120375  (Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:  1215  FLCC
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## **COVER LETTER**

TO:	Registration Se Division of Co.			
SUBJI	ECT: Melbo	urne Green LLC		
	·	(Name of Limite	d Liability Company)	<del></del>
The en	closed Articles o	f Organization and fee(s) are so	ubmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
	Gordon B	adger		
		(1	Name of Person)	
	First Four	dation Holdings L	LC	
		(	Firm/Company)	
	774 N Ap	ollo Blvd		
	•	· · · · · · · · · · · · · · · · · · ·	(Address)	
	Melbourn	ne , Florida, 3293	35	
	<del></del>	(City	(State and Zip Code)	
For fu	ther information	concerning this matter, please	cail:	
Gord	don Badge	<b>r</b>	at ( 321 ) 751 99	69
,	(Name	of Person)	at (321) 751 99 (Area Code & Daytime	Celephone Number)
Enclos	sed is a check fo	or the following amount:		
☐ \$125	5.00 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 Addresses Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons r Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
Melbourne Green LLC					
(Must end with the words "Limited Liability Company, "Limite	d 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:				
774 N Apolio Blvd	Melbourne , Florida, 32935				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another				
The name and the Florida street address of the re	egistered agent are:				
KEAllen Kenneth Name	E. Allen				
774 N Apollo Blvd	(NO DE MOTE LA				
Florida street add Melbourne	ress (P.O. Box <u>NOT</u> acceptable)  FL 32935				
City, State, a	nd Zip				
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	nccept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S				
(LOC. OE					
Registered Agent's Signate  (CONTINE  Page 1 of 2	UED)				

<u>Γitle:</u>	Name and Address:
'MGR" = Manager	
'MGRM" = Managing Me	mber
MGR	KEAHER Kenneth E. Allen
	774 N Apollo Blvd
	Melbourne , Florida, 32935
<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
Use attachment if necessa	ry)
•	
LE V: Effective date, if off	ner than the date of filing: (OPTION
	ate must be specific and cannot be more than five business d
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fective date is listed, the days after the date of filing REQUIRED SIGNATURED SIGNATURED Signature	RE:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Filing Fees: