

(Re	questor's Name)	
///	dress)	
(Λα	alessi	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	TIAW 🔲	MAIL MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		-
		١ ١
		1/201
		- This
	Office Use Onl	v JNN ^U



01/17/06--01035--004 **130.00

COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: Linda & Chiu-JU Properties, LLC (Name of Limited Liability Company) The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Chiu-Ju Pritchett (Name of Person) Linda & Chiu-Ju Properties, LLC (Firm/Company) 1515 W. Mariah Way Fort Walton Beach, FL 32547 For further information concerning this matter, please call: at (850) 543-3771 (Area Code & Daytime Telephone Number) Robert D. Holton (Name of Person) Enclosed is a check for the following amount: ☐ \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Linda & Ch	iu-JU Properties, LLC		
		ry, "Limited Company" or their abbreviation "LLC," or	r "L.C.,")
ARTICLE II The mailing a		of the principal office of the Limited Liabi	ility Company is:
Principal Of	fice Address:	Mailing Address:	
1515 W. Marie	ah Way	1515 W. Mariah Way	
Fort Walton B	each, FL. 32547	Fort Walton Beach, FL. 32547	·
outhing willy ,	vith an active Florida registration.)		
-	,	of the registered agent are:	05 JAN 1 SECRETO TALLAHACE
-	the Florida street address	of the registered agent are:	OS JAN 17 P SECRETORY O
-	the Florida street address	Name	OS JAN 17 PM I SECNETOR OF ST TALLAHACTER FLOO
-	the Florida street address Robert D. Holton 227 Seville Circle	Name	OS JAN 17 PM 1: OC SECRETARY OF STATE TALLAMACTES FLORIDA
-	the Florida street address Robert D. Holton 227 Seville Circle	Name	05 JAN 17 PM 1:00 SECRETORY OF STATE TALLAMACLES FLORIDA
-	the Florida street address Robert D. Holton 227 Seville Circle Florida : Mar Esther	Name Street address (P.O. Box NOT acceptable)	OS JAN 17 PM 1:00 SECRETARY OF STATE TALLAHACTES PLORIDA

(CONTINUED)
Page 1 of 2

Registered Agent'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 Men	Name and Address:
MGR	Chiu-Ju Pritchett 1515 W. Mariah Way Fort Walton Beach, FL. 32547
MGRM	Linda Lawrence 212 Buck Circle Clanton, AL. 35045
	AN 17 PM
(Use attachment if necessar	y)
	er than the date of filing: (OPTIONAL) te must be specific and cannot be more than five business days prior 3.)
REQUIRED SIGNATURE	E: - Suddet of a member or an authorized representative of a member.

Filing Fees:

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

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

(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.)

Pritchett Typed or printed name of signee