

L060000 23839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

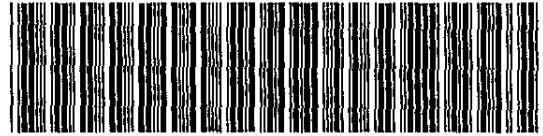
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MAR -1 PM 2:42
JAN 1 2006

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[Signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Artifex Investments, 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:

Chris Oswald

(Name of Person)

Artifex Investments, LLC

(Firm/Company)

1408 Connecticut Ave.

(Address)

Lynn Haven, FL 32444

(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Oswald at (850) 248-9958 or 276-3369
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Artifex Investments, LLC

(Must end with the words "Limited Liability Company," "Limited 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:

Artifex Investments, LLC

Artifex Investments, LLC

1408 Connecticut Ave.

1408 Connecticut Ave.

Lynn Haven, FL 32444

Lynn Haven, FL 32444

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Christopher A. Oswald

Name

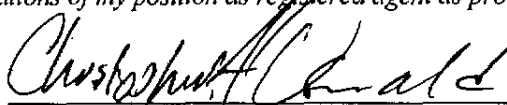
1408 Connecticut Ave.

Florida street address (P.O. Box **NOT** acceptable)

Lynn Haven, FL 32444 FL 32444

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 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.

 2/27/2006

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK OF CIRCUIT COURT
FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Christopher A. Oswald

1408 Connecticut Ave.

Lynn Haven, FL 32444

MGRM

Nancy E. Sprague

1410 Connecticut Ave.

Lynn Haven, FL 32444

MGRM

Albert F. Adcock

4405 Pinetree Lane

Lynn Haven, FL 32444

MGRM

Foster L. Jennings

1907 Scarlett Blvd.

Lynn Haven, FL 32444

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: Feb. 24, 2006 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(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.)

CHRISTOPHER A. OSWALD
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 (Optional)

\$ 5.00 Certificate of Status (Optional)