

Florida Department of State

Division of Corporations
Public Access System

Electronic Filing Cover Sheet

06000027919

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000069656 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : RUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 MAR 15 AM 12:12

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Eliot & Maries LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

DB

H06000069656

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Eliot & Maries LLC**

ARTICLE II - Address

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

Principal Office Address:

Mailing Address:

8810 SW Highway 200, Suite 115-116

8810 SW Highway 200, Suite 115-116

Ocala, FL 34481

Ocala, FL 34481

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

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

Robert Eldredge

Name

3580 Highway 44 West

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Inverness, FL 34453

(City / State / Zip)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 MAR 15 AM 12:12

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.

Kathleen McLaughlin
Registered Agent's Signature - Robert Eldredge

H06000069656

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:

MGR

Kathleen McLaughlin- 6847 SW 86th Street, Ocala, FL 34476

(Use attachment if necessary)

REQUIRED SIGNATURE:

Kathleen McLaughlin

Signature of a member or 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.)

Kathleen McLaughlin

Typed or printed name of signee

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
2006 MAR 15 AM 12:12