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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

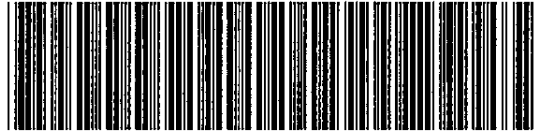
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Properties for All LLC

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- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

Signature

Requested by:

SW

5/12

Name

Date

Time

Walk-In

Will Pick Up

**ARTICLES OF ORGANIZATION FOR
PROPERTIES FOR ALL, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I

NAME

The name of the Limited Liability Company is: **PROPERTIES FOR ALL, LLC**

ARTICLE II

ADDRESS

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

Principal Office Address: 14955 71st Place North
Loxahatchee, Florida 33470

Mailing Address: 14955 71st Place North
Loxahatchee, Florida 33470

ARTICLE III

**REGISTERED AGENT, REGISTERED OFFICE AND
REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the Registered Agent are:

Robert Nelligan
14955 71st Place North
Loxahatchee, Florida 33470

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

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am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

X Robert Nelligan
Registered Agent's Signature

ARTICLE IV

MANAGING MEMBER

The name and address of the Managing Member is as follows:

Title

Name and Address

MGRM (Managing Member)

Robert Nelligan
14955 71st Place North
Loxahatchee, Florida 33470

X Robert Nelligan
Robert Nelligan

(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.)

Robert Nelligan
Typed Name of Signee