

L06000095652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

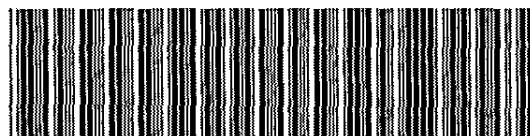
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900079859079

09/28/06--01018--021 **125.00

FILED
06 SEP 28 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

msk

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EDDIE ALLEN, L.L.C.
(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:

EDDIE ALLEN
(Name of Person)

EDDIE ALLEN, L.L.C.
(Firm/Company)

115 BREAM ROAD
(Address)

SATSUMA FLORIDA 32189
(City/State and Zip Code)

For further information concerning this matter, please call:

EDDIE ALLEN at 386 244-2873
(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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

☒ **MAILING ADDRESS:**
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME:

The name of the Limited Liability Company is:

Eddie Allen, L.L.C.

ARTICLE II

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

115 Bream Road
Satsuma, Florida 32189

The street address of the principal officer of the Limited Liability Company is:

115 Bream Road
Satsuma, Florida 32189

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

Eddie Allen
115 Bream Road
Satsuma, Florida 32189

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, Florida Statutes.

Eddie Allen

Eddie Allen

FILED
06 SEP 28 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

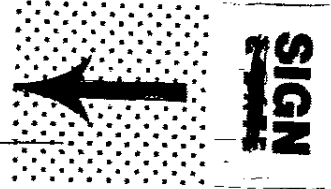
**SIGN
HERE**

ARTICLE IV - MANAGER

The name and address of each Manager is as follows:

Eddie Allen
115 Bream Road
Satsuma, Florida 32189


Eddie Allen



(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.)

Printed name of signee: Eddie Allen