

LO60000101558

(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:

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300078937273

EFFECTIVE DATE

12/1/06

08/29/06--01021--016 **130.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 OCT 17 PM 2:42

~~100038101~~

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BENJAMIN F. MELVILLE, LLC

(Proposed company name - must include suffix)

Enclosed is an original and one (1) copy of the Limited Liability Company and a check for:

☐ \$125.00

Filing fee & Designation
of Registered Agent

☒ \$130.00

Filing Fee, Designation of
Registered Agent, &
Certificate of Status

☐ \$160.00

Filing Fee, Designation
of Registered Agent,
Certified Copy, &
Certificate of Status

Please return all correspondence concerning this matter to the following:

Benjamin F. Melville
329 Redwing Way
Casselberry, FL 32707

For Further information concerning this matter, please call: Benjamin F. Melville at (407) 947-9347.

Street Address:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 30, 2006

BENJAMIN F. MELVILLE
329 REDWING WAY
CASSELBERRY, FL 32707

SUBJECT: BENJAMIN F. MELVILLE, LLC
Ref. Number: W06000038404

We have received your document for BENJAMIN F. MELVILLE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on August 29, 2006. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6853.

Leslie Sellers
Document Specialist

Letter Number: 606A00053180

ARTICLES OF ORGANIZATION

OF

BENJAMIN F. MELVILLE, LLC

EXECUTIVE DATE
10/11/06

The undersigned subscribers to this limited liability company, natural persons competent to contract, hereby form a limited liability company under the laws of the State of Florida.

ARTICLE I - NAME

The name of the Limited Liability Company is: BENJAMIN F. MELVILLE, LLC.

ARTICLE II - ADDRESS

The mailing address and the street address of the principal office of the Limited Liability Company is 329 Redwing Way, Casselberry, FL 32707.

ARTICLE III - REGISTERED AGENT

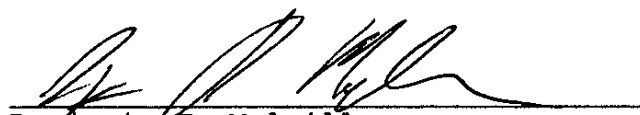
The registered agent of this company shall be:

NAME

ADDRESS

Benjamin F. Melville	329 Redwing Way Casselberry, FL 32707
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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.


Benjamin F. Melville

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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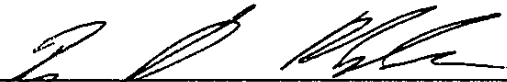
ARTICLE IV - MANAGEMENT

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

<u>Title:</u>	<u>Name and Address:</u>
Manager	BENJAMIN F. NELVILLE 329 REDWING WAY CASSELBERRY, FL 32707

ARTICLE V - EFFECTIVE DATE

The effective date of the Limited Liability Company is requested to be OCTOBER 11, 2006.



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.)

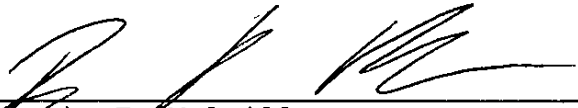
BENJAMIN F. NELVILLE

Printed name of signer

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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IN WITNESS WHEREOF, We have hereunto set our hands and seals, acknowledged and filed the foregoing Limited Liability Company under the laws of the State of Florida this 14th day of August 2006.


Benjamin F. Melville

STATE OF FLORIDA)
)
COUNTY OF SEMINOLE)


The foregoing instrument was acknowledged before me this 14th day of August 2006, by Benjamin F. Melville, who is personally known to me or who has produced driver's license as identification and who did take an oath. **FL DL# M414-066-77-102-0**




Notary Public, State of Florida
At Large

My Commission Expires:

Having been named as Registered Agent and to accept Service of Process for the above-stated company at the place designated herein, 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.


Benjamin F. Melville

DATE: August 14, 2006

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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