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(Re	equestor's Name)			
(Ad	ldress)			
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(Cit	ty/State/Zip/Phone	· #)		
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SECRETARY OF STATE DIVISION OF CORPORATIONS

JAN 3 0 2007.

COVER LETTER

TO:	Registration Se Division of Co				
SUBJE	Stepho	ens Property LLC (Name of Limite	d Liability Company)		-
The end	closed Articles of	f Organization and fee(s) are s	ubmitted for filing.		
Please	return all corresp	ondence concerning this matte	er to the following:		
	Steve Alle				,
			Name of Person)		
į	Stephens	Property LLC			
·		(Firm/Company)		
	6520 Bay	yshore Blvd.			
			(Address)	•	
•	Tampa, I	FL 33611			-0 -2
		(City	/State and Zip Code)		17 J
For fur	ther information	concerning this matter, please	call:		OT JAN 29 PH 2: 22
Stev	e Allen	lenat (813) 766-6520		PH.	
	(Name	of Person)	(Area Code & Daytim	e Telephone Number)	2:2
Enclos	sed is a check fo	or the following amount:			2
I \$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Sta	tus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Add Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	itions	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:						
•						
Stephens Property LLC						
(Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")					
ADTICLE II Address.	7 OF					
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is a street address.						
The maning address and breet address of the pri	3 SYFE					
Principal Office Address:	Mailing Address:					
8191 D Blaikie Ct.	6520 Bayshore Blvd.					
Sarasota, FL 34240	Tampa, FL 33611 2 5					
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: Steve Allen						
Name						
6520 Bayshore Blvd.						
	ress (P.O. Box <u>NOT</u> acceptable)					
Tampa, FL 33611	FL .					
City, State, and Zip						
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regis	accept service of process for the above stated limited this certificate, I hereby accept the appointment as it. I further agree to comply with the provisions of all reformance of my duties, and I am familiar with and sered agent as provided for in Chapter 608, F.S					

(CONTINUED)
Page 1 of 2

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

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

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	Steve Allen	
	6520 Bayshore Blvd.	
	Tampa, FL 33611	
MGRM	Matt Allen	
	8191 D Blaikie Ct	
	Sarasota, FL 34240	_
MGRM	Mark Williams	_9 01V S
	8191 A Blaikie Ct	Sign Sign
·	Sarasota, FL 34240	_ 至 50.
		JAN 29 PH
		9 PH 2: 22
		— N S:
		2: 22
(Use attachment if necessary)		₹ %
ARTICLE V: Effective date, if other than (If an effective date is listed, the date mu to or 90 days after the date of filing.)	the date of filing: 1/26/07 . (OP: st be specific and cannot be more than five business).	TIONAL) ess days prior
REQUIRED SIGNATURE: Signature of a me	ember or an authorized representative of a member.	
of this document of	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.)	

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)

Steve Allen

Typed or printed name of signee