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SECRETARY OF STATE ON SECRETARY OF CORPORATIONS

COVER LETTER

TO:	Registration S	ection	•	
	Division of Co	orporations		
SUBJ	ect: <u>Com</u>	rons office (Name of Limite	RETIREMENT ed Liability Company)	, <u>LLC</u>
The en	closed Articles o	of Organization and fee(s) are s	submitted for filing.	
Please	return all corresp	pondence concerning this matt	er to the following:	
	_LEONA	4BD J CONNOR	<u>S</u>	
		((Name of Person)	9
				OT N
			(Firm/Company)	OT APR 19
	1607	E. REYNOLDS	STREET	0F CORPORATOR
			(Address)	9 PM 2: 44
				2: 1
	PLAN	T CITY FL 3	33563	<u></u>
		(City	y/State and Zip Code)	
For fu	rther information	concerning this matter, please	call:	
LEI		CONNORS e of Person)	at (<u>813</u>) <u>752- (</u> (Area Code & Daytime T	9596 elephone Number)
Enclo	sed is a check f	or the following amount:		
\$ 12	5.00 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)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	nns r Circle

ARTICLES OF ORGANIZATION

FOR

CONNORS OFFICE RETIREMENT, LLC

A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

Connors Office Retirement, LLC

ARTICLE II- Address

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

Principal Office Address:

1007 E. Reynolds Street

Plant City, FL 33563

Mailing Address:

1007 E. Reynolds Street

Plant City, FL 33563

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

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

Leonard J. Connors 1007 E. Reynolds Street Plant City, FL 33563

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.



Leonard J. Connors, registered agent

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

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

Title:

Name and Address

"MGR = Manger

"MGRM" = Managing Member

Manager

Leonard J. Connors 1007 E. Reynolds Street Plant City, FL 33563

ARTICLE V

Effective date, if other than the date of filing:

(If an effective date is listed, the date must be specified and cannot be more than five business days prior to or 90 days after the date of filing.)

(In accordance with section 608.408(3), Florida Statues, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

REQUIRED SIGNATURE:

Leonard J. Connors, manager