# L07000049266

(Req	uestor's Name)	
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Via Certified Mail Return Receipt Requested

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

Re: PETER GRABNER, L.L.C.

The enclosed Articles of Organization and fees are submitted for filing. In accordance with your fee schedule, please find our check no. 1007, dated May 3, 2007 in the amount of \$160.00 that covers the following:

- 1. Filing Fee
- 2. Certificate of Status
- 3. Certified Copy

Please file the original Articles of Organization, certify the enclosed copy, and return the certified copy and Certificate of Status to us in the enclosed self-addressed, postage-paid envelope provided for your convenience.

If you require any additional information or have questions regarding the above-referenced enclosures, please contact Kathleen M. Grabner at (727) 236-3029. We appreciate your assistance in this matter.

Sincerely, Enthlun M. Grabner

Kathleen M. Grabner

/kmg Enclosures 07 MAY -8 PM 3: 28

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2 2 2 24 5 1 (=2)	

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

### **ARTICLE II - Address:**

**ARTICLE I - Name:** 

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

# Principal Office Address: Mailing Address:

The name of the Limited Liability Company is:

5717 SEA BREEZE DRIVE 5717 SEA BREEZE DRIVE PORT RICHEY, FL 34668 PORT RICHEY, FL 34668

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:

Name

STIT SEA BREEZE DRIVE

Florida street address (P.O. Box NOT acceptable)

PORT RICHEVEL 3 4668

City, State, and Zip

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..

Registered Agent's Signature (REQUIRED)

(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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	DETLEV PETER GRABNER 5717 SEABREEZE DRIVE PORT RICHEY, FL 34668
MG-RM	KATHLEEN M. GRABNER 5717 SEA BREEZE DRIVE PORT RICHEY, FL 34668
(Use attachment if necessary)  LE V: Effective date, if other than the	e date of filing: MAV 1, 2007 .(OPTIONAL)

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

# **REQUIRED SIGNATURE:**

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.)

KATHLEEN M. GRABNEA
Typed or printed name of signee

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)