## L0700050988

Stephen Reilly (Requestor's Name)  3705 Willow Cill (Address)
(Requestor's Name)
3705 Wicklow arde
(Address)
(Address)
Tallalence, F1 32309 (City/State/Zip/Phone #) (850) 893-8551
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
Pelican Point Investment, u (Business Entity Name)
(Business Entry Name)
(Document Number)
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SECRETARY OF STATE
ALLAHASSEE, FI SATE

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

PELICAN P	DINT I	nuestments	No Cz
ARTICLE II - Address: The mailing address and street a	ddress of the pri	ncipal office of the Lin	nited Liability Company is:
Principal Office Address:	•	Mailing Address:	Control of the state of the sta
3705 Willow Tallahassee, F.	Golda 323	09 (54	ine)

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

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

Stephen C. Reilly
Name

3705 Wicklow Circle

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

Tallahassee FL 32309

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

(CONTINUED)

Page 1 of 2

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MERM	Stephen C. Reilly
	Tollafesseo, Fl 32309
M	Donns H. Reille wife of Stephen C. Reilly
	(AS Tevants by the Sonticety)
	Tallalones, Fl 32309
	·
	,
(Use attachment if necessary)	
NOTE: An additional article	must be added if an effective date is requested.
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE.	
(	to Cally
Signature of a	member or an authorized representative of a member.
	with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury
	stated 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)