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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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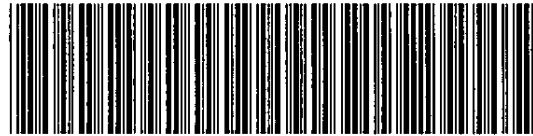
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MCDONOUGH FAMILY, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDREA M. MAYES

(Name of Person)

COHEN & GRIGSBY, P.C.

(Firm/Company)

1100 5TH AVENUE SOUTH, STE 301

(Address)

NAPLES, FLORIDA 34102

(City/State and Zip Code)

For further information concerning this matter, please call:

ANDREA MAYES

(Name of Person)

at ( 239 ) 213-4046

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 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 Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

MCDONOUGH FAMILY, LLC

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

### ARTICLE II - Address:

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

#### Principal Office Address:

2340 WULFERT ROAD  
SANIBEL ISLAND, FL 33957-2208

#### Mailing Address:

2340 WULFERT ROAD  
SANIBEL ISLAND, FL 33057-2208

### 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:

CHARLES W. MCDONOUGH

Name

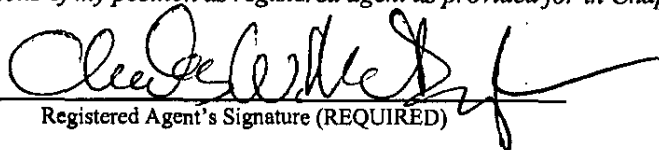
2340 WULFERT ROAD

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

SANIBEL ISLAND FL 33957-2208

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)

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(CONTINUED)

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**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

CHARLES W. MCDONOUGH

2340 WULFERT ROAD

SANIBEL ISLAND, FL 33957-2208

MEMBER

MICHELE M. MCDONOUGH

2424 5TH AVENUE

LOS ANGELES, CA 90018-1866

MEMBER

BRIAN J. MCDONOUGH

412 CENTER ROAD

MONROEVILLE, PA 15146-1324

MEMBER

LOREN I. GREENWAY

249 CONSTITUTION AVENUE, BOX 259

CONNOQUENESSING, PA 16027

(Use attachment if necessary)

see additional member - attached

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

CHARLES W. MCDONOUGH

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)**

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TALLAHASSEE, FLORIDA

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MEMBER

JOHN M. MCDONOUGH  
15 SETON COURT  
ROCHESTER, NY 14526-9791

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