

L07000072255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

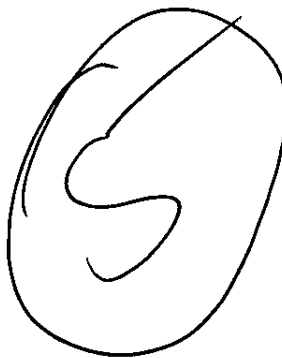


800104495128

L07-72255

06/21/07--01012--013 **125.00

L07-28878



FILED
07 JUL 12 AM 11:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EDGEWOOD AVENUE, 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:

WINSOME C. MCFARLANE
(Name of Person)

EDGEWOOD AVENUE, LLC
(Firm/Company)

3056 MISTY MARSH DRIVE
(Address)

JACKSONVILLE FL 32226
(City/State and Zip Code)

For further information concerning this matter, please call:

WINSOME C. MCFARLANE at (904) 821-9906
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 26, 2007

WINSOME C. MCFARLANE
3056 MISTY MARSH DRIVE
JACKSONVILLE, FL 32226

SUBJECT: EDGEWOOD AVENUE, LLC
Ref. Number: W07000029978

We have received your document for EDGEWOOD AVENUE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters " MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

We do not file Operating Agreements in this office.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

RUSSELL L HUNT
Document Specialist

Letter Number: 007A00041672

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

EDGEWOOD AVENUE, LLC

ARTICLE II - Address:

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

Principal Office Address:

3056 MISTY MARSH DRIVE

JACKSONVILLE FL 32226

Mailing Address:

3056 MISTY MARSH DRIVE

JACKSONVILLE FL 32226

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

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

WINSOME C. MCFARLANE

Name

3056 MISTY MARSH DRIVE

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

JACKSONVILLE

FLORIDA 32226

City, State, and Zip

FILED
07 JUL 12 AM 11:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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, Florida Statutes..



Registered Agent's Signature

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

1) MGR
Donovan R. McFarlane
MGRM
Winsome McFarlane

Name and Address:

DONIVAN R. MCFARLANE
3056 MISTY MASH DRIVE
JACKSONVILLE FL 32226

WINSOME C. MCFARLANE
3056 MISTY MARSH DRIVE
JACKSONVILLE FL 32226

(Use attachment if necessary)

FILED
07 JUL 12 AM 11:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Winsome McFarlane

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.)

Winsome MCFARLANE

Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)