07000102474

(Requestor's Name)		
(Address)		
(Address)		
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



800110326148

10/08/07--01030--023 **130.00

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: REALTY MANAGEMENT SERVICES, 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:
FRANCIS A. MORGAN, JR (Name of Person)
REALTY MANAGEMENT SERVICES, LCC (Firm/Company)
755 18TH AVE. SOUTH 3
NAPLES, FLORIDA 34102 & STATE OF THE STATE O
(City/state and Zip Code)
For further information concerning this matter, please call:
FRANCIS A. MORGAN JR at (40) 924-8444 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigsim \bigsim \b
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Street/Courier Address Registration Section Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	07 OC7
REACTY MANAGEMENT SERVICES (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	FILED STATE
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Co	ompany is:
Principal Office Address: Mailing Address:	
755 18TH AVE., SOUTH P.O. BOX 369 NAPLES, FL 34102 NAPLES, FL 34106	<u>-</u> 0369
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatu (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or anot business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	EFFECTIVE DATE
FRANCIS A. MORGAN, JR	10/01/07
755 18 TH AVE SONTH	
Florida street address (P.O. Box <u>NOT</u> acceptable)	
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)

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member MGRM	FRANCIS A. MORGAN, JR 755 18TH AVE., SOUTH NAPLES, FL 34102
	DIVISION OF CO
	PH 3: 02
(Use attachment if necessary)	
RTICLE V: Effective date, if other than the an effective date is listed, the date must b or 90 days after the date of filing.)	e date of filing:
REQUIRED SIGNATURE:	
Signature of a member	er or an authorized representative of a member.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee