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SECRETARY OF STATE
TALL AHASSEE FLORID

D. BRUCE

JAN 0 4 2008

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: FRANCIS R. COX, JR. 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 R COX, JR. (Name of Person)
FRANCIS R. Cox, JR. "LLC"
207 VIA Deluna Drive
Pensacola Beach, Rlorida 325@\$ & (City/State and Zip Code)
For further information concerning this matter, please call:
FRANCIS R. LOX, JR at (850) 748-7672 (Area Code & Daytime Telephone Number 3
Enclosed is a check for the following amount:
□\$125.00 Filing Fee Certificate of Status □\$155.00 Filing Fee Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Must end with the work	ds "Limited Liability C		LLC.")		
ARTICLE II - Address: The mailing address and street add	dress of the princ	ipal office of the I	Limited Liab	ility Compa	ıny is:
Principal Office Address:	<u>N</u>	<u> Iailing Address:</u>		.	
207 ViA Delu Pensacola Bch. Fl	ina Dr.	us A	me		
ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registr The name and the Florida street ac 2///	e as its own Registered ration.) Idress of the registered registered ration. Name N. Ace	Agent. You must desig	nate an individua		
<u>tens</u>	City, State, and	L 32505-	<u> </u>		
Having been named as registered liability company at the place of registered agent and agree to act all statutes relating to the prope	designated in this t in this capacity.	certificate, I hereb I further agree to	by accept the comply with	appointmer the provisi	nt as ons of

(CONTINUED)

Registered Agent's Signatur (REQUIRED)

and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

The name and address of each Manager or	Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
FRANCIS R. COX, JR.	207 ViA Deluna DR Pensacola Bch. Florda 32561
	Pensacola Beach Florida 32561
·	
	
(Use attachment if necessary)	
(If an effective date is listed, the date must be prior to or 90 days after the date of filing.)	e of filing: (OPTIONAL) specific and cannot be more than five business days
REQUIRED SIGNATURE: Tranco	R. Coo. Da. HALLAHA
Signature of a member or a (In accordance with section of this document constitutes that the facts stated herein	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.) Cox Printed name of signée

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

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)