## L08000070715

(Damiestaria Nama)
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DOWN DWAT DWA
PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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EXAMINER

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## **COVER LETTER**

10:	Division of Corporations				
SUBJE	ECT: Lutz Realty, LLC			·	
50201		ted Liability Compa	any)		
The en	closed Articles of Organization and fee(s) are	submitted for filing	<b>3</b> ,		
Please	return all correspondence concerning this mat	ter to the following	;;		
	Bruce Jenkins			TAL SE	n
		(Name of Person)		JUL 22 CRETAR LAHAS	
	, , , , , , , , , , , , , , , , , , ,	(Firm/Company)		Ma D	(
	17111 Orangewood Driv	ve		STE 2: 5	
		(Address)	•	DA S	
	Lutz, Florida 33548				
	(Ci	ty/State and Zip Code	e)		
For fur	rther information concerning this matter, pleas	se call:			
Bru	ce Jenkins	at (	218-37	00	
	(Name of Person)	(Area Cod	e & Daytime Tele	ephone Number)	
Enclos	sed is a check for the following amount:				
<b>\$125</b> .	.00 Filing Fee \$\sum \\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Co (additional cop	ру	\$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	Registrat Division Clifton E 2661 Exc	ourier Addression Section of Corporations duilding ecutive Center (		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
17111 Orangewood Drive Lutz, Florida 33548	17111 Orangewood Drive Lutz, Florida 33548
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of   Bruce Jenkins	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another  the registered agent are:  Name  Registered Agent's Signature:  ASECRETARY  22
17111 Orange	
Florida stre Lutz, Florida 33	

Registered Agent's Signature (REQUIRED)

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..

(CONTINUED) Page 1 of 2

## 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 "MGRM" = Managing Mem	Name and Address: ber
MGRM	Bruce Jenkins 17111 Orangewood Drive Lutz, Florida 33548
MGRM	Therese Jenkins 17111 Orangewood Drive Lutz, Florida 33548  ARY ET ARY E
	P 2: 55 FLORIDA
(Use attachment if necessary	
effective date is listed, the date 0 days after the date of filing.	e must be specific and cannot be more than five business day )
REQUIRED SIGNATURE	a monthey or an authorized representative of a member.

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)

Typed or printed name of signee