

WD8 0000081284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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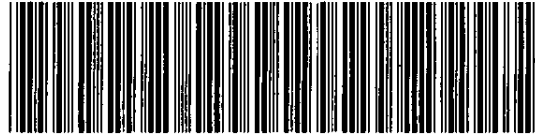
(Business Entity Name)

(Document Number)

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EXAMINER

# DAVID J. SIMMONS CO., A Legal Professional Association

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DAVID J. SIMMONS, J.D., M. TAX, L.L.M. (ESTATE PLANNING)  
BOARD CERTIFIED WILLS, TRUSTS & ESTATES  
FELLOW AMERICAN COLLEGE OF TRUST AND ESTATE COUNSEL  
MEMBER OF OHIO AND FLORIDA BARS

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E-MAIL: dsimmons@djsestatelaw.com

August 20, 2008

Florida Department of State  
Division of Corporations  
Corporate Filings  
P. O. Box 6327  
Tallahassee, FL 32314

Re: F. Louise Benson Limited Liability Company

Dear Sir or Madam:

Enclosed is an executed Articles of Organization for the above-mentioned limited liability company. Please file the same and return a time-stamped copy to the undersigned in the envelope provided. Our firm's check in the amount of \$125.00 is enclosed.

Thank you for your assistance in this matter.

Very truly yours,



---

David J. Simmons

DJS:mrmm

Enclosures

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TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

F. Louise Benson Limited Liability Company

(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:

31515 Avenue F  
Big Pine Key, FL 33043

#### Mailing Address:

31515 Avenue F  
Big Pine Key, FL 33043

### 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 other business entity with an active Florida registration.)

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

F. Louise Benson

Name

31515 Avenue F

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

Big Pine Key, FL 33043

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.*

*F. Louise Benson*

Registered Agent's Signature (REQUIRED)

(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

F. Louise Benson

31515 Avenue F

Big Pine Key, FL 33043

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**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:**

*F. Louise Benson*

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.)

F. Louise Benson, Co-Trustee

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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