

L09000084883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

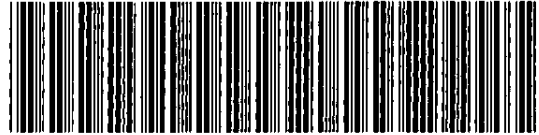
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

SEP - 2 2009

EXAMINER



000160007540

09/01/09--01013--010 \*\*160.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
09 SEP - 1 AM 9:58

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 21<sup>ST</sup>, L.L.C.  
(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:

James E. Willis, Esq.  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

975 6<sup>th</sup> Ave. S. #200  
(Address)

Naples, FL 34102  
(City/State and Zip Code)

For further information concerning this matter, please call:

James Willis at ( 239 ) 435-0094  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|---|---|--|

**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

**ARTICLES OF ORGANIZATION  
OF  
21ST, L.L.C.**

**ARTICLE I - NAME**

The name of the limited liability company is 21ST, L.L.C., ("company").

**ARTICLE II - ADDRESS**

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

Principal Office Address:

318 SE 21st Street  
Cape Coral, Florida 33990

Mailing Address:

318 SE 21st Street  
Cape Coral, Florida 33990

**ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

Mark Hieser  
318 SE 21st Street  
Cape Coral, Florida 33990

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
09 SEP - 1 AM 9:58

*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..*

x Mark Hieser  
Mark Hieser

#### ARTICLE IV – MEMBERS and MANAGING MEMBER

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

<u>Title:</u>	<u>Name and Address:</u>
Managing Member	Mark Hieser 318 SE 21st Street Cape Coral, Florida 33990
Member	Juanita G. Hieser 318 SE 21st Street Cape Coral, Florida 33990

#### REQUIRED SIGNATURES:

x Mark Hieser

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.)

Mark Hieser

Typed or printed name of signee

x Juanita G. Hieser

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.)

Juanita G. Hieser

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY 21ST, L.L.C, SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA:

1. The name of the Limited Liability Company is 21ST, L.L.C.
2. The name and the Florida street address of the registered agent and office are:  
Mark Hieser  
318 SE 21st Street, Cape Coral, Florida 33990 (Post office box is NOT acceptable.)

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.

x Mark Hieser  
Mark Hieser  
Registered Agent