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EXAMINER

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TO:

Registration Section

Divis	sion of Corporations		
SUBJECT:	CARTER & ASSOCIATES PR	ROPERTY MANAGEMENT COMPANY, L	.LC
	(Name of Lim	ited Liability Company)	
The enclosed	Articles of Organization and fee(s) are	e submitted for filing.	
Please return a	all correspondence concerning this ma	atter to the following:	
WIL	LIAM N. CARTER, SR.		
		(Name of Person)	
CAR	TER & ASSOCIATES PR	OPERTY MANAGEMENT COMPAN	IY, LLC
		(Firm/Company)	
8514	4-9 Charter Club Circle		
		(Address)	
Fort	Myers, FL 33919		
	(C	ity/State and Zip Code)	
For further inf	formation concerning this matter, pleas	se call:)OT 26
WILLIAM	I N. CARTER, SR.	at (239) 482-6630	AG P
	(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a	check for the following amount:		aller for an age
∑Î \$125.00 Fili	ng Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Certified Copy (additional copy is enclosed) Certified Copy (additional copy	Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 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:

CARTER & ASSOCIATES PROPERTY MANAGEMENT COMPANY, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
8514-9 Charter Club Circle	8514-9 Charler Club Circle
Fort Myers, FL 33919	Fort Myers, FL 33919
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re-	gistered agent are:
WILLIAM N. CARTER	R, SR. 58 2:
Name	#F 9
8514-9 Charter Club	Circle
Florida street addre	ess (P.O. Box NOT acceptable)
Fort Myers	_{FL} 33919
City, State, an	d Zip
liability company at the place designated in the registered agent and agree to act in this capacity.	except service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and

Filler to-Cartay 5

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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	WILLIAM N. CARTER, SR.
	8514-9 Charter Club Circle
	Fort Myers, FL 33919
	-
(Use attachment if necessary)	Chand
AGELOUIN NO PROPERTY TO A COMPANY	
an effective data is listed, the data must	the date of filing: (OPTIONAL) st be specific and cannot be more than five business days prior
or 90 days after the date of filing.)	
or you days after the date of hing.	The second se
REQUIRED SIGNATURE:	
$\bigcap_{x \in X} A_x$	AA
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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.)

WILLIAM N. CARTER, SR.

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)