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S. HAWKES

NOV - 2 2063
EXAMINER

COVER LETTER

то:		on Section of Corporations			
SUBJE	CT: Sm	artChoice Prop		ies, LLC nited Liability Company)	
		(Maine	or Lin	inted Liability Company)	
The encl	losed Artic	les of Organization and fe	e(s) aı	re submitted for filing.	
Please re	eturn all co	rrespondence concerning	this m	atter to the following:	
			Jai	mes Broomfield	
-				(Name of Person)	
		SmartChoi	ce]	Properties, LLC	
_				(Firm/Company)	
		16151 N	W (60th Avenue	
	•			(Address)	
		Twonton	E-1.	22602	
		Trenton,		orida 32693 ity/State and Zip Code)	·
For furth	er informa	tion concerning this matte	r, plea	se call:	
Eth	nel Ri	ley Varie of Person)		at (<u>352</u>) <u>463-80</u> (Area Code & Daytime T	014
	1)	anc of Ferson)		(Alea Code & Daytime 1	elephone (vuinoer)
Enclosed	d is a chec	k for the following amo	unt:		
፟፟፟ \$125.0	0 Filing F	See \$130.00 Filing Certificate of Stat	Fee &	& S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address		Street/Courier Addres	<u>s</u>
		Registration Section Division of Corpora		Registration Section Division of Corporation	ns
		P.O. Box 6327	14	Clifton Building	Cinala

Tallahassee, FL 32301

ARTICLE I - Nan	ne: mited Liability Company	ie:	OMPANY B T
	, , ,	is.	TARY OF SIME
SmartChoice	Properties, LLC		35
(Must end with the words	s "Limited Liability Company, "Li	mited Company" or their abbreviation "LLC," or "L.C	部が
ARTICLE II - Ad	dress:		7
		principal office of the Limited Liability	Company is:
Principal Office A	ddress:	Mailing Address:	
SmartChoice	Properties, LLC	SmartChoice Properties,	LLC
	th Ave.	16151 NW 60th Ave.	
Trenton, Flo	rida 32693	Trenton, Florida 32693	-
(The Limited Liability Co business entity with an a	mpany cannot serve as its own Rective Florida registration.)	ed Office, & Registered Agent's Signat gistered Agent. You must designate an individual or an eregistered agent are:	other
	James Broomf	ield	
	Nan	ne	
	16151 NW 60th	Avenue	
-		ddress (P.O. Box <u>NOT</u> acceptable)	
	Trenton,	FL 32693	
-	City, State		
liability compan registered agent and statutes relating to	y at the place designated in d agree to act in this capac o the proper and complete p	o accept service of process for the above st this certificate, I hereby accept the appoin ity. I further agree to comply with the prov performance of my duties, and I am familia gistered agent as provided for in Chapter 6	ntment as visions of all ir with and
	James Brox	mlueld	

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
"MGR"	
MGK	Ethel Riley 16151 NW 60th Ave.
	Trenton, Florida 32693. 2
/	
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	<u> </u>
	70
	=======================================
	<u> </u>
Use attachment if necessary)	
Ose attachment if necessary)	
	on the data of Elina N/A (OPTIO)
LE V: Effective date, if other th	an the date of filing:
LE V: Effective date, if other the ective date is listed, the date in	tust be specific and cannot be more than five business de
E V: Effective date, if other the ective date is listed, the date in lays after the date of filing.)	an the date of filing: N/A (OPTION ust be specific and cannot be more than five business dates that the specific and cannot be more than five business dates.
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ective date is listed, the date may after the date of filing.) REQUIRED SIGNATURE:	nust be specific and cannot be more than five business d
ective date is listed, the date may after the date of filing.) REQUIRED SIGNATURE:	nust be specific and cannot be more than five business d
ective date is listed, the date mays after the date of filing.) REQUIRED SIGNATURE: Signature of a material (In accordance we have	nust be specific and cannot be more than five business d

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)