L1000033201

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
·.		

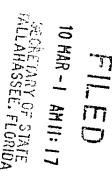
Office Use Only

EFFECTIVE DATE 3/1/1D



000170664990

03/01/10--01017--008 **160.00



D. BRUCE

MAR 0 2 2010

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: FTA Pro	operties LLC.			
		ed Liability Company		
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.		
Please return all corresp	oondence concerning this matt	er to the following:		
Gordon Ladw	via			
		Name of Person		-
		Firm/Company		-
4906 Nassau	Ct.	Address		
		Addica	HAS S	5 -
Cape Coral,			£ -	-
		y/State and Zip Code	FLOT	
northside@td		for future annual report notification)	<u> </u>	<u>-</u>
			DA DA	j
For further information	concerning this matter, please	e call:		
Gordon Ladwig		at (608)235-4500		
Name	of Person	Area Code & Daytime Tele	phone Number	
Enclosed is a check f	or the following amount:			
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155,00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	1)
	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 C		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

principal office of the Limited Liab	
antinoinal office of the Limited Lieb	
	nility Company ic:
principal office of the Emitted Liat	niity Company is.
Mailing Address:	
4906 Nassau Ct.	
Cape Coral, FL 33904	
	ial or another
e registered agent are:	IO MAR
ne registered agent are:	10 MAR - 1
	<u> </u>
	<u> </u>
me	
•	4906 Nassau Ct.

Registered Agent's Signature (REQUIRED)

(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:

"MGR" = Manager		
"MGRM" = Managing Member		
MGMR	Gordon Ladwig	
	4906 Nassau Ct.	·
	Cape Coral, FL 33904	
MGMR		
WGWR	Mary Ladwig	
	4906 Nassau Ct.	
	Cape Coral, FL 33904	
		a pro-
		<u> </u>
		表面
		S
		- 변숙 -
(Use attachment if magazanu)		
(Use attachment if necessary)		-
	. Agri Morob 1 2010	
LE V: Effective date, if other than the	date of filing: March 1, 2010	—— (⊕#ioMy
fective date is listed, the date must b	e specific and cannot be more than	ı five bu s iness dāy
days after the date of filing.)		

REQUIRED SIGNATURE:

Sanature 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.)

Gordon Ladwig

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)

Page 2 of 2