

L10000028491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

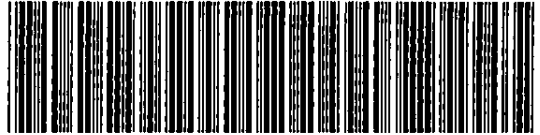
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



600172023386

03/15/10--01036--009 **125.00

EFFECTIVE DATE 6/1/2010

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAR 15 AM 8:05

B. KOHR

MAR 16 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

EFFECTIVE DATE 4/1/2010

SUBJECT: 1021 Michigan Avenue, LLC

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:

Joe Shingary

Name of Person

Firm/Company

2336 S East Ocean Blvd #333

Address

Stuart, Florida 34996

City/State and Zip Code

shingary@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joe Shingary

Name of Person

at (772) 463 6686

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

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

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1021 Michigan Avenue, 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:

2336 S. East Ocean Blvd #333

Stuart, FL 34996

Mailing Address:

2336 S. East Ocean Blvd #333

Stuart, FL 34996

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 another business entity with an active Florida registration.)

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

Joe Shingary

Name

2336 S East Ocean Blvd #333

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

Stuart

FL 34996

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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DIVISION OF CORPORATIONS
10 MAR 15 AM 8:05

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:

MGR

Joe Shingary

2336 S East Ocean Blvd #333

Stuart, Fl 34996

MGRM

Gretchen Gaebel

2336 S East Ocean Blvd #333

Stuart, Fl 34996

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: April 1, 2010. (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:


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.)

Joe Shingary

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)