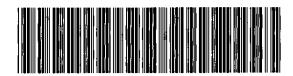
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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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EXAMINER

JIVISION OF CORPORATIONS

10 MAR 15 PH 2: 46

CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

				6	
Finders Keepers of Wil	ldwood, LLC			6	10 P
dcary81@aol.com		.,	- - - -		
				Art of Inc. File LTD Partnership File Foreign Corp. File	
			<u></u>	L.C. File Fictitious Name File	
				Merger File	
				Art. of Amend. File RA Resignation Dissolution / Withdrawal	
			_	Annual Report / Reinstatement	,
			-	Photo Copy Certificate of Good Standing Certificate of Status	_
				Certificate of Fictitious Name Corp Record Search	
				Officer Search Fictitious Search Fictitious Owner Search	
Signature				Vehicle Search Driving Record	
	03/15/10 Date	11:00 Time		UCC 11 Search	
Walk-In	Will Pick Up		_	UCC 11 Retrieval	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPAÑ

ARTICLE I - Name: The name of the Limited Liability Company is: Finders Keepers of Wildwood, 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:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

848 S. Main Street, Wildwood, FL 34785

(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:

848 S. Main Street, Wildwood, FL 34785

Dawn A.	Cary
	Name
10145 C	R 117
-	Florida street address (P.O. Box NOT acceptable)
Oxford	FL 34484
	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)
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:

	Title:	Name and Address:
	"MGR" = Manager "MGRM" = Managing Member	
	•	
	MGRM	Dawn A. Cary
		10145 CR 117
		Oxford, FL 34484
	MGRM	Eldene L. Hearns
		1596 Black Lake Drive
		The Villages, FL 32162
	(Use attachment if necessary)	·
RTT	CLE V: Effective date if other than the d	late of filing: (OPTIONAL)
fan	effective date is listed, the date must be	specific and cannot be more than five business days prior
	0 days after the date of filing.)	promise and carmot be into chair live business days prote
	<u>REQUIRED</u> SIGNATURE:	
	, A _	0 (
	Signature of a member	or an authorized representative of a member.
		V
	(In accordance with section of this document constitution)	ion 608.408(3), Florida Statutes, the execution ites an affirmation under the penalties of perjury
	or this document constitu	an arremandir didder did pendinga di perjury
	that the facts stated herei	in are true.)
		in are true.)
	Dawn A. Cary	ed or printed name of signce

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)