

L10000035990

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2010 APR -1 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

APR 2 2010

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THE WORD IN ARCADIA L.L.C
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:

Robert James Grinis

Name of Person

The word in Arcadia LLC

Firm/Company

428 N Brevard Avenue

Address

ARCADIA FL 34266

City/State and Zip Code

ggape 3322 @ arthLink.net

Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert James Grinis at (863) 558 2415

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for 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)

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:

The Word in Arcadia L.L.C.

(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:

428 N Brevard Ave
Arcadia, FL
34266

1685 SE Tangelo Dr
Arcadia FL
34266

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:

Robert James Grinis
Name

1685 SE Tangelo Dr
Florida street address (P.O. Box **NOT** acceptable)
Arcadia FL 34266
City, State, and Zip

2010 APR -1 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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..

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows: 2010 APR -1 PM 12: 55

Title:

"MGR" = Manager

"MGRM" = Managing Member

"MGR"

MGRM

Treasurer

Name and Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Robert James Grinis
1685 SE Tangelo Dr
Circadia, FL 34266

Robert James Grinis
1685 SE Tangelo Dr
Circadia, FL 34266


Robert James Grinis
1685 SE Tangelo Dr
Circadia, FL 34266

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

Robert James Grinis
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)